

MATERIALS FURNISHED AT CIA HEADQUARTERS BY
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

2200

FILE TITLE/NUMBER/VOLUME:

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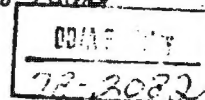
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NOTES MAY BE COPIED OR REPRODUCED FROM THIS FILE

SMITH, JOSEPH L

SECRET

78-16-10



18 MAY 1978

MEMORANDUM FOR: Director of Central Intelligence

VIA : Deputy Director for Administration

FROM : F. W. M. Janney
Director of Personnel

SUBJECT : [REDACTED]

1. (U) Action Requested: None; this memorandum is in response to your request of 15 May 1978 to provide you with a very brief rundown on [REDACTED]

2. (C) [REDACTED] holds B.A. and M.A. degrees in History and has studied at the Ph.D. level in this field. He served as a Corporal in the U.S. Army (1943-46) and from 1946-51 he was an Assistant Professor of History at Dickinson College. He entered on duty with the Agency in September 1951 as a GS-09 and reached the GS-14 level before his retirement in June 1973. At the time of his retirement, he was assigned to the DIX/Western Hemisphere Division. He received the Career Intelligence Medal. [REDACTED]

[REDACTED]

[REDACTED]

4. (U) In the event you wish to read further on this subject, we have attached papers furnished us by [REDACTED] the Office of General Counsel.

F. W. M. Janney

Attachment

SECRET

78-1610

78-1468

15 MAY 1978

MEMORANDUM FOR: Director of Personnel
FROM: Director of Central Intelligence
SUBJECT: Joseph Burkholder Smith

Could you give me a very brief rundown on who Joseph Burkholder Smith is, the one who just had an article in The Washington Post on Sunday. He apparently retired in 1973.

Stansfield Turner
STANSFIELD TURNER

ARTICLE APPEARED
ON PAGE D-4

THE WASHINGTON POST
14 May 1978

How CIA Agents Suffer From Secrecy



CONTINUED

By Joseph Burkholder Smith

TWENTY-FIFTH college reunions are great occasions for letting the world know how well you've done, and mine was no exception. All my old classmates, it seemed, had become assistant secretaries of state or vice presidents of General Motors or had acquired some equally impressive title. So it was a little embarrassing when they'd ask me what I was up to.

Not that I hadn't done well myself — I was at the time fairly high up in the Central Intelligence Agency. But I wasn't allowed to say that, so when they asked, I had to mumble something vague about being a civilian employee at Patrick Air Force base, an excuse that, I could tell, conjured up images of genteel failure (too much drinking, perhaps) in the people who heard it.

Not being able to impress my old classmates was a small wound, but it symbolizes an important problem for CIA agents. We live in a society where lots of people plan their lives so as to accumulate the greatest possible number of credentials of the sort that will wow their peers at reunions and similar moments. These credentials give many Americans a sense of identity and of security. CIA people are by no means immune to the desire to impress people with credentials, but their jobs are directly at odds with that urge. In that way and several others, we in the CIA have been deprived of the normal ego supports of the American life of our time, and how we dealt with that didn't deal with their absence from our lives has had something to do with how our agency has (and hasn't) done its job.

It wasn't just our status among our peers that suffered as a result of our work. Normal family life was a victim too. The CIA's Clandestine Services division has for years had the highest divorce rate of any organization in the government. Part of the reason is that recruits of my generation of clandestine operators were instructed never to tell their wives what they were really doing. "Just say it's a question of national security," they told us when we had to take one of our frequent absences from home.

Of course, many men also discovered quickly what an improvement that line was over the old "working late at the office" routine and took advantage of it. Still, most of the marital problems came not from philandering but from the unspectacular, bitter toll that living under cover takes on people. Officers with good marriages might tell their wives in general terms what kind of work keeps them out at night, but they have to insist that the wives give no hint. The first thing a CIA wife learns is never to ask another woman what her husband does, for fear she will be asked the same question.

CIA wives also have to join their husbands in keeping their children in the dark. When schools have programs in which the kids' fathers tell their classes about their fascinating work, she has to help invent reasons why her child can't volunteer his father's participation. When the son wants to visit his father's office, the way his friends do, she must try to ease his terrible feeling of rejection when his father tells

him no. This kind of travail makes many women wonder if it's worth the effort.

Talking to Yourself

IF A CIA AGENT is stationed in Washington, he has to get used to being asked at every party, by every stranger he meets, "What do you do?" Personal qualities like kindness, good temper, or intelligence — even good looks and money — mean nothing in the nation's capital compared with where one stands in the pecking order. A CIA couple who maintain their cover are quickly "selected out" of any party they go to and end up in a corner talking to themselves.

CIA wives, particularly, feel this instant social failure deeply and resent it. Until the women's movement, most women were raised to channel their ambitions toward the areas of party-giving and cooking. When married to a CIA agent, they felt they were denied these things because of their husbands' work, and their marriages got into trouble.

When CIA families go abroad they find their lives even more disrupted by status anxieties. The American official community, centered at the embassy, spends more time and effort than the Soviet KGB trying to discover who are the CIA families. If a CIA officer is assigned to the embassy under the guise of being in the Foreign Service, the U.S. Information Service, or the Agency for International Development, the real employees of those organizations ferret the CIA agents out and then take pains to treat them as second-class citizens. The government employees who are "legitimate" embassy personnel don't speak to them at all. If they arrive at the embassy under deep cover, with no false identity, then not even the other CIA personnel speak to them.

The game of uncovering the CIA people is made simple for the "legitimate" embassy personnel by a number of means. The State Department won't let CIA agents call themselves, as a cover, Foreign Service Officers; they have to say they're "Foreign Service Reserve" or "Foreign Service Staff" officers. Real FSSs, as they're called, are fairly low-level and real FSRs are never in political jobs, so the CIA's people — listed as FSS or FSR "political officers" — are obvious to one and all.

In the same status-preserving spirit, the State Department used to publish an annual Biographic Register, a who's who of the Foreign Service that included information on degrees, jobs, and murky pasts; it wasn't until 1973 and the murders of several CIA agents that State made the Biographical Register a classified document.

Envy, Jealousy, and Distrust

THERE ARE several ways to deal with the problem of credentials. One is to rise above the woes of status anxiety. Another is to learn to laugh them off, even if they are painful. Unfortunately, however, a more common way of handling the trade-off between your cover and your status is to give up some of the first to get more of the second. In foreign capitals CIA agents often have been so anxious for the natives and the diplomatic community to consider them

CONTINUED

important that they've made their secret jobs obvious — which has not only brought them envy, jealousy, and distrust, but has made it very hard for them to do their job of intelligence-gathering properly.

"Do you know that CIA people are paid double salaries to serve abroad?" the new political officer in Singapore said to me when I showed him and his family around the Singapore Swimming Club on the Sunday after he arrived. "They get paid twice as much as you or I do. They get paid for their cover jobs and then paid again for their hanky-panky work. That's why they live better than we do."

I felt flattered that I was holding my cover well enough to be told his secret, and I only wished what he was saying were true.

But it was an impression that was understandable, if erroneous. CIA officers did serve in covers that were lower in rank than their real jobs, and both on the job and off, they didn't live lives consistent with the rank they were pretending to have. For reasons of their jobs, agents cultivate contacts in the local government and other diplomatic missions in circles far higher than people of their cover rank ever have a chance to meet. And they insist on renting the kind of houses to which their CIA rank entitles them, as well as demanding and receiving a lot of special perquisites.

My new friend was wrong about the double salaries, but all the CIA officers he had seen abroad would certainly have given him the impression that he had about that rate of compensation.

In particular, most CIA station chiefs are not content to live in quarters much less grand than the ambassador's official residence. In many countries, this makes sense — the CIA has liaison responsibilities that are officially recognized by the ambassador and the State Department. But this is not appreciated by the lower-level employees of the embassy, if it's told to them at all. Resentment of the chief of station's lifestyle bubbles up.

In the past, many chiefs of state made no attempt to hide their preference for dealing with the CIA station chief rather than the ambassador — sometimes because they owed a great debt to the CIA, which may have stolen the election for them or financed the coup that put them in power. In any case, CIA station chiefs have always felt they could not entertain these men in hotels. It would be detrimental to the prestige and interests of the United States, they argue, if they did not have the rank and accoutrements of the foreigners with whom they deal. One station chief I knew in the 1960s got two grade promotions by this gambit. It has served many a CIA official well in regard to his housing.

Frank Saxon, in his book "Secret Interval," gives a vivid account of the perquisites agency personnel enjoyed in Vietnam. They had their own hotel, club, swimming pool, and cars. In the 1960s in Asia it was customary for CIA officers to have chauffeurs, too, as the rationale that you needed somebody around to guard CIA cars against looting. Since the cars were government property, the gas and oil

and maintenance costs, as well as the chauffeur, were paid for out of the station's housekeeping funds. People who were listed as lowly attaches were often seen driving around in big, unmarked, chauffeured cars, which drove the Foreign Service Officers into frenzies of envy.

"We'll Entertain Ourselves"

EVEN WORSE, perhaps, than using perquisites to fend off the pangs of status anxiety is CIA people's tendency to huddle together. If the rest of the world thought we were nondescript Army officers and the like, well, we knew who we was and wasn't who and could play the game with each other. The other embassy personnel won't invite us to their parties! We're too low on the diplomatic list to get invited to the important functions given by other embassies and by officials of the local government? We'll entertain ourselves. Conscientious CIA officers try hard to curb this practice, which after all is a breach of nearly every tenet of good security, but they fail more often than they succeed.

In the days when our national purpose was more clearly defined, when we would, in the words of John F. Kennedy, pay any price and bear any burden in defense of the free world, it didn't matter so much if the cover of CIA personnel was a little thin. In some countries, the prestige of the agency was even higher than it was at home, enormously higher than it has been at home for the last three years. In the Philippines in the late 1960s, the CIA was so well regarded that members of the Army Counter Intelligence Corps used to try to recruit Filipinos by passing themselves off as CIA agents. Today, the open life style of a station chief can lead to his death, as it did for Richard Welch in Athens.

Welch was killed by the gun of an anti-American assassin, but the gun was put into the assassin's hand by all the defenses against the dilemma of covert life that I've described. Welch lived in a house inherited from past station chiefs, everyone in the embassy knew his true position, and his biography appeared in the *Biographic Register*, which could be found in any library.

After Welch died the matter was mercifully classified, but that doesn't mean an end to the problem. CIA personnel will always feel a strain from having to pretend to be much less successful than they really are — even if they love their work and believe in it deeply, they'll still feel pangs. That's human nature, and while we ought to curb the obviousness of CIA agent identities, to some extent we've just got to deal with it.

One way to do that is to treat CIA agents sympathetically. These are obviously people who have sacrificed something to work for the agency, and who depend to an inordinate extent on having stable relationships with their co-workers, since they can't have stable relationships with anyone else. The main thing in an agent's life — practically the only thing, for many — is how he's treated at Langley, where he stands there.

CONTINUED



CIA Director Adm. Stansfield Turner.

So when Adm. Stansfield Turner quickly fired 820 Clandestine Services officers last year, my initial approval (some of those fired, I thought, must have been the people who made me decide to leave the CIA in 1979) gave way to misgivings. It's true that the greatest physical hazard many spooks have ever faced is the danger of choking on the pit of the olive in their martini. But the greatest hazard we all face in life is not physical danger, it's having something eat away at our soul. No one has to be a clandestine operator, of course, but once he is, he is deprived of the normal means of sustaining his self-image that prevails in our society.

I don't mean Turner should have kept on incompetents. But I'm sure that after those 820 firings everybody else at Langley felt bitter and frightened. These are not, after all, people who have anything else to fall back on, and they need a lot of support from their organization. Turner has to use these people, and if he wants to use them effectively he ought to find a way of letting some go while making the rest feel secure.

The author, whose article is reprinted from The Washington Monthly, is a former high CIA official.

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				8 June 1973	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
3. NATURE OF PERSONNEL ACTION: CONVERSION FROM RETIREMENT (VOLUNTARY) UNDER CIARDS AND CANCELLATION OF N.S.C.A.				4. EFFECTIVE DATE REINSTATED	
				MONTH DAY YEAR	
				06 30 73	
5. CATEGORY OF EMPLOYMENT				REGULAR	
6. FUNDS				7. PAN AND NSCA	
<input type="checkbox"/> V TO V <input type="checkbox"/> C TO V <input checked="" type="checkbox"/> V TO C <input type="checkbox"/> C TO C				3135 0990 0000	
8. LEGAL AUTHORITY (Completed by Office of Personnel) Public Law 88-643 Section 233					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION	
DDO/WH DIVISION FOREIGN FIELD BRANCH 1					
11. POSITION TITLE				12. POSITION NUMBER	
OPS OFFICER				0340	
13. OCCUPATIONAL SERIES				14. GRADE AND STEP	
GS				14 8	
15. SALARY OR RATE				16. SALARY OR RATE	
28478				28478	
17. REMARKS					
LAST WORKING DAY 29 JUNE 1973.					
1 - Security 1 - Finance					
18A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
C/HH/PERS		8 JUN 73		6/12/73	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRAL CODE	24. MODIFY CODE
15	10	NUMERIC ALPHABETIC			3
25. DATE OF GRADE	26. DATE OF GRADE	27. DATE OF GRADE	28. DATE OF GRADE	29. DATE OF GRADE	30. DATE OF GRADE
MO DA YR	MO DA YR	MO DA YR	MO DA YR	MO DA YR	MO DA YR
31. SECURITY REQ. NO.	32. SECURITY REQ. NO.	33. SECURITY REQ. NO.	34. SECURITY REQ. NO.	35. SECURITY REQ. NO.	36. SECURITY REQ. NO.
37. SOCIAL SECURITY NO.	38. SOCIAL SECURITY NO.	39. SOCIAL SECURITY NO.	40. SOCIAL SECURITY NO.	41. SOCIAL SECURITY NO.	42. SOCIAL SECURITY NO.
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE	44. LEAVE CAT.	45. FEDERAL TAX DATA	46. STATE TAX DATA	47. FEDERAL TAX DATA	48. STATE TAX DATA
CODE	CODE	CODE	CODE	CODE	CODE
0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	1-YES 2-NO	1-YES 2-NO	1-YES 2-NO	1-YES 2-NO	1-YES 2-NO
49. POSITION CONTROL CERTIFICATION	50. O.P. APPROVAL	51. DATE APPROVED	52. DATE APPROVED	53. DATE APPROVED	54. DATE APPROVED
11/11/73-78	08 JUL 1973	6/11/73			

FORM 1152

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-6332

1A-3
APR 68

141

No. Active Registry
73-5753

4 September 1973



Dear 

As you bring to a close your active career of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find your retirement filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

/s/ W. E. Colby

W. E. Colby
Director

Distribution:

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OP/RAD/ROB/WFW/lks

Originator: 
Director of Personnel

SECRET

COVERT									
THRU CCS									
FINANCES									
ANNUITY PAYMENTS SHOULD BE					U.S. GOV'T. CHECK		OTHER (Payment instructions follow)		
TAX DOCUMENTATION SHOULD BE					CIA		CSC		OTHER (MEMO FOLLOWS)
REQUEST TRANSFER OF FUNDS FROM CIVIL SERVICE COMMISSION					YES		NO		INTERNAL TRANSFER
INSURANCE									
FGLI		OVERT		COVERT		MAINTAIN RECORDS INTERNALLY ONLY			
TYPE OF HOSPITALIZATION CARD: <u>NO. 1 - L.I.V. HOSPITALIZATION</u>									
AUTHORIZATION TO CONVERT INSURANCE					YES		CONVERSION MUST BE APPROVED BY CCS		
RESERVE									
MEMBER OF CIVILIAN RESERVE					YES		NO		OVERT
									COVERT
REMARKS									
CHIEF, COVER SUPPORT BRANCH, CENTRAL COVER STAFF									
THIS SECTION TO BE COMPLETED BY OFFICE OF SECURITY									
OTHER INSTRUCTIONS AS FOLLOWS: NO SECURITY OBJECTIONS TO ABOVE.									
CHIEF, EMPLOYEE ACTIVITY BRANCH, OFFICE OF SECURITY									

FORM 3429 USE PREVIOUS EDITIONS

SECRET

E.O. 12958 CL. BY: 007522

(S)

7 - OFF. PERS. FILE ROOM

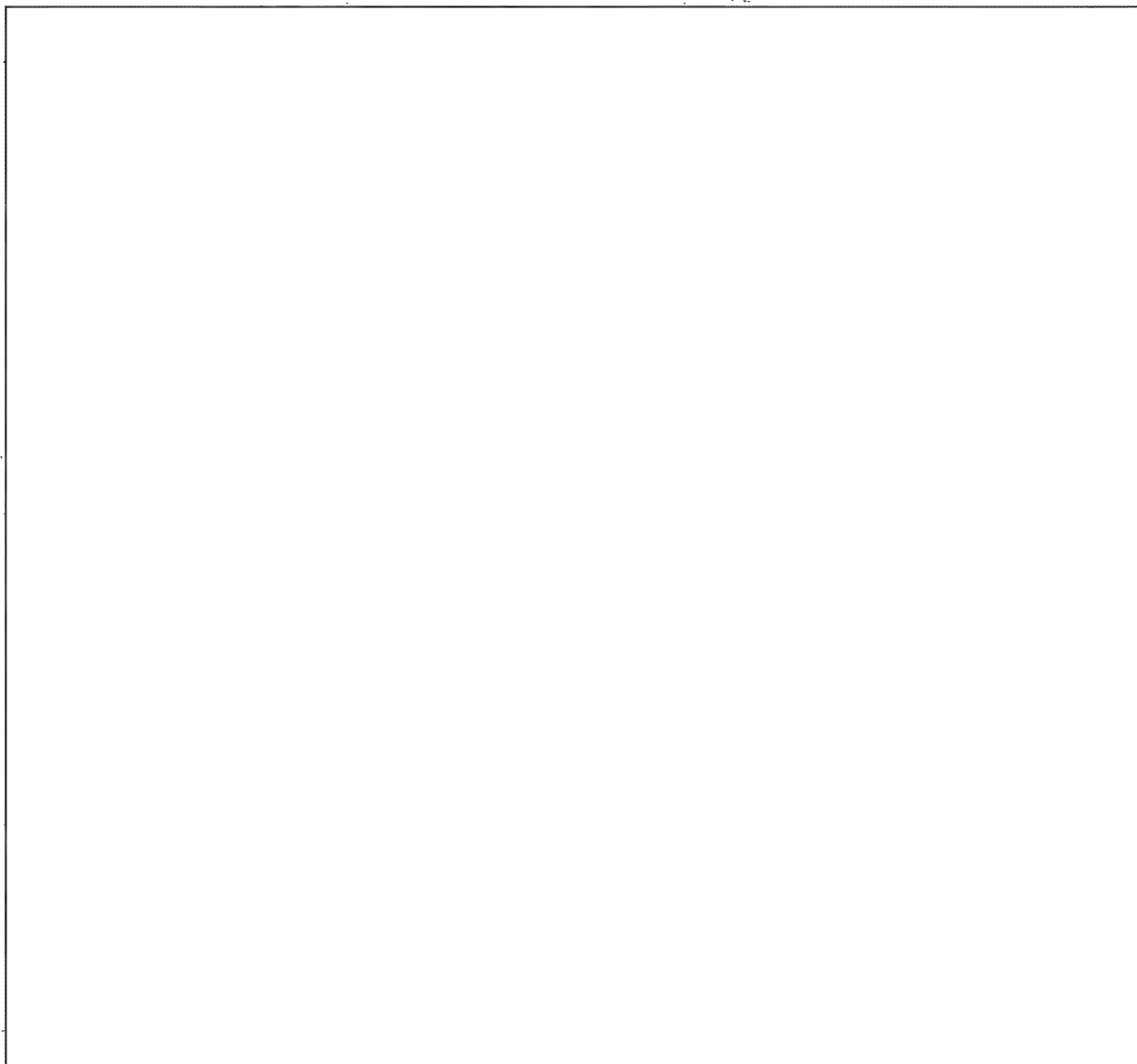
SECRET

SUMMARY OF AGENCY EMPLOYMENT



September 1951 to January 1954 - Began employment with the Department of the Army as a Civil Service employee in grade GS-11, assigned to the Pentagon in Washington, D.C. as a research analyst of economics and political affairs concerning Korea. Because of my wartime experience and some post war graduate work on Korea, I was contacted by the Army for this position during the Korean War.

January 1954 to August 1956 - In 1954 I applied for employment with the United States Information Service as an Information Officer with the Grade of Foreign Service Staff S. I served on the U.S.I.S. Mission in the Far East area. My duties included design execution and supervision of the U.S.I.S. media operations in the Far East. Also I was special liaison representative with the British Information Officer for the British High Commissioner for that area.



SUMMARY OF AGENCY EMPLOYMENT,

[Redacted]

(Cont'd)

CONCUR:

CCS

[Redacted]

CI Staff

DATE

DATE

April 25, 1973

APPROVED:

[Redacted]

Office of Security

DATE

4/47/73

OFF

16 April 1973

MEMORANDUM FOR: Chief, WII Division
THROUGH : Deputy Director for Operations
SUBJECT : Career Intelligence Medal for
[redacted]

1. The Honor and Merit Awards Board is pleased to notify you that the Career Intelligence Medal has been approved in recognition of [redacted] contributions to this Agency. You are requested to inform him of the award and of the security provisions governing it as set forth in the attached memorandum from the Office of Security.

2. When [redacted] returns to Washington, please notify the Executive Secretary, Honor and Merit Awards Board, extension 3645, room 412, Magazine Building, so that presentation arrangements may be made.

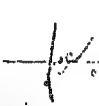
[redacted]
Recorder
Honor and Merit Awards Board

Att

Distribution:

- O & 1 8 Addressee
1 - D/Pers -- OFF W/ FORMS 382 & 600
1 - Exec Sec/IMAB
1 - Recorder/IMAB

DD/MS 73-1220
OPR

REPORT OF HONOR AND MERIT AWARDS BOARD				DATE
The Honor and Merit Awards Board having considered a recommendation that:				27 March 1973
AL OR ID NO.	NAME (Last-First-Middle)	GRADE	SER	TYPE EMPLOYEE
				Staff
OFFICE OF ASSIGNMENT		SD	SCHEME	GRADE
DDO/WH		D	GS	14
RE AWARDED				
Career Intelligence Medal				
<input type="checkbox"/> FOR HEROIC ACTION ON				
<input checked="" type="checkbox"/> FOR MERITORIOUS SERVICE OR ACHIEVEMENT DURING THE PERIOD September 1951 - Present				
<input checked="" type="checkbox"/> RECOMMENDS APPROVAL				
<input type="checkbox"/> DOES NOT RECOMMEND APPROVAL				
<input type="checkbox"/> RECOMMENDS AWARD OF				
UNCLASSIFIED CITATION				
<p> [redacted] is hereby awarded the Career Intelligence Medal in recognition of exceptional achievement throughout his Agency career. During more than 21 years of service, [redacted] a dedicated intelligence officer, served in a variety of important positions at Headquarters and abroad--consistently demonstrating skill, imagination and enthusiasm. [redacted] is a recognized authority in his field. His overall performance and the high quality of his work have contributed significantly to the mission of the Central Intelligence Agency, reflecting credit on him and the Federal service. </p>				
REMARKS				
(Recommendation approved by ADD/O on 3 March 1973)				
APPROVED		SIGNATURE		
 1st Vernon A. Walters DIRECTOR OF CENTRAL INTELLIGENCE		/s/HARRY B. FISHER		
DATE		TYPED NAME OF CHAIRMAN, HONOR AND MERIT AWARDS BOARD		
13 APR 1973		Harry B. Fisher		
		SIGNATURE		
		Signed Original		
		TYPED NAME OF RECORDS		
		[redacted]		

SECRET
(When Filled In)

OPF

RECOMMENDATION FOR HONOR OR MERIT AWARD (Submit in triplicate - see HR 20-37)				
SECTION A PERSONAL DATA				
1. EMP. SER. NO.	2. NAME OF PERSON RECOMMENDED (Last, First, Middle)	3. POSITION TITLE	4. GRADE	5. SD.
		Ops Officer	GS-14	D
6. OFFICE OF ASSIGNMENT	7. OFFICE EXT. (If Any)	8. STATION		
DDP/WH		FIELD (Specify location)		
9. HOME ADDRESS (No., St., City, State, ZIP Code)		10. HOME PHONE	11. CITIZENSHIP AND HOW ACQUIRED	
			U.S. Birth	
12. RECOMMENDED AWARD		13. 19 RETIRING DATE OF RETIREMENT	14. POSTHUMOUS	
Career Intelligence Medal		15 August 1973	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
16. RELATIONSHIP		17. HOME ADDRESS (No., St., City, State, ZIP Code)	18. HOME PHONE	
Wife				
SECTION B RECOMMENDATION FOR AWARD FOR HEROIC ACTION OR ACCEPTANCE OF HAZARD				
19. WERE YOU AN EYEWITNESS TO THE ACT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
PERSONNEL IN IMMEDIATE VICINITY OR WHO ASSISTED IN ACT OR SHARED IN SAME HAZARD:				
20. FULL NAME	21. ORGN. TITLE	22. GRADE	23. OFFICE OF ASSIGNMENT	
LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN ACT:				
24. FULL NAME	25. AWARD RECOMMENDED			
CONDITIONS UNDER WHICH ACT WAS PERFORMED:				
26. LOCATION	27. INCLUSIVE DATES	28. TIME OF DAY		
29. DETAILING GEOGRAPHIC CONDITIONS AND OBSTACLES ENCOUNTERED				
30. DATES FOR WHICH AWARD RECOMMENDED	31. ASSIGNMENT COMPLETED	32. NOW IN SAME OR RELATED ASSIGNMENT		
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
SECTION C RECOMMENDATION FOR AWARD FOR ACHIEVEMENT, SERVICE, OR PERFORMANCE				
33. DO YOU HAVE PERSONAL KNOWLEDGE OF THE SERVICE OR PERFORMANCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
34. OFFICIAL ASSIGNMENT OF PERSON RECOMMENDED AT TIME OF SERVICE OR PERFORMANCE				
Recommendation covers entire career.				
35. COMPONENT OR STATION (Designation and location)				
Various.				
36. DUTIES AND RESPONSIBILITIES OF ASSIGNED POSITION				
37. INCLUSIVE DATES FOR WHICH RECOMMENDED	38. ASSIGNMENT COMPLETED	39. NOW IN SAME OR RELATED ASSIGNMENT		
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
PERSONNEL WHO ASSISTED OR CONTRIBUTED SUBSTANTIALLY TO THE SERVICE OR PERFORMANCE				
40. FULL NAME	41. ORGN. TITLE	42. GRADE	43. OFFICE OF ASSIGNMENT	
LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN THE PERFORMANCE				
44. FULL NAME	45. TYPE OF AWARD			

SECRET
(When Filled In)

EPF

SECTION D	NARRATIVE DESCRIPTION
<p>Award for Heroic Action or Acceptance of Hazard: Was act voluntary? Describe why act was outstanding, and if it was more than normally expected. Explain, why, and how. If an aerial or marine operation, describe type and position of craft, crew position of individual, and all unusual circumstances. Include results of the act. Enclose unclassified citation.</p> <p>Award for Achievement, Service, or Performance: State character of service during period for which recommended. (Give complete description of administrative, technical, or professional duties and responsibilities if not covered in Section C; include dates of assignment and relief.) What did the individual do that merits the award? Why was this outstanding when compared to others of like grade and experience in similar positions or circumstances? If appropriate, include production records and assistance rendered by other persons or units. What obstacles were encountered or overcome? Indicate results of achievement, service, or performance. Include reference to Fitness Reports, Letters of Commendation, or other documentation already on file which supports this recommendation. Enclose unclassified citation.</p>	

[redacted] has made an outstanding contribution to CIA operations for the past 21 years. He has consistently received strong/outstanding efficiency reports in a wide variety of assignments.

[redacted] In all his assignments his rating officers have consistently praised his imagination, flexibility, enthusiasm, perception and professionalism.

[redacted] career has been one of exceptional achievement and he has made an outstanding contribution to the Agency's Covert Action program and to Agency training. His record of commendations and sustained superior performance of duty of value to the Agency throughout his career make it fitting that he be awarded the Career Intelligence Medal upon termination.

40. ENCLOSURES (List individually) IF ORIGINATOR IS NOT AN EYEWITNESS OR DOES NOT HAVE PERSONAL KNOWLEDGE OF THE ACT OR PERFORMANCE, ATTACH AFFIDAVITS OF EYEWITNESS OR INDIVIDUALS HAVING PERSONAL KNOWLEDGE OF THE FACTS.
1. PROPOSED CITATION
 - 2.
 - 3.

47. RECOMMENDATION INITIATED BY Theodore G. Shackley	48. TITLE AND SIGNATURE OF EMPLOYEE MAKING RECOMMENDATION <i>Theodore G. Shackley</i> Chief, WH Division	49. DATE 11/1/73
---	--	-------------------------

SECTION E RECOMMENDATION FORWARDED THROUGH OFFICIALS CONCERNED FOR THEIR INFORMATION		
50. HEAD OF <u>D</u> CAREER SERVICE (Career service of business)	TITLE AND SIGNATURE See Item 52	DATE
51. DEPUTY DIRECTOR OF CAREER SERVICE	TITLE AND SIGNATURE See Item 52	DATE
52. DEPUTY DIRECTOR OF OPERATING COMPONENT	TITLE AND SIGNATURE <i>John M. ...</i> Deputy Director for Plans	DATE 3.11.73

SECRET

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER										21 MAY 1969	
2. NAME (Last-First-Middle)											
3. NATURE OF PERSONNEL ACTION										4. EFFECTIVE DATE REQUESTED	
										MONTH DAY YEAR 05 21 69	
5. CATEGORY OF EMPLOYMENT										REGULAR	
6. FUNDS										7. FINANCIAL ANALYSIS NO	
V TO V										CHARGEABLE	
C TO V										9135 0990	
X C TO C										8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATION										10. LOCATION OF OFFICIAL STATION	
DDP/WH FOREIGN FIELD BRANCH 1											
11. POSITION TITLE										12. POSITION NUMBER	
OPS, OFF/CGI										0340	
14. CLASSIFICATION SCHEDULE (GS, I.R., etc.)										13. CAREER SERVICE DESIGNATION	
GS										D	
15. OCCUPATIONAL SERIES										16. GRADE AND STEP	
0136.01										04 7 14 6	
17. SALARY OR RATE										17,289 \$ 19,771	
18. REMARKS											
All SICK AND 1200 HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE DEPARTMENT OF STATE											
MARITAL STATUS: MARRIED											
DATE SIGNED											
FEE SIGNATURE OF CAREER SERVICE APPROVING OFFICER											
DATE SIGNED											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEREST CODE	24. DEDUCTIONS	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LIT			
55	10	51630	1114	45075	5	3					
28. RET. EFF. DATE	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. EMPLOYER CANCELLATION DATA	EOD DATA			33. SECURITY REG NO	34. SEA		
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LEAVE COMP. DATE	38. CAREER CATEGORY	39. LEGAL-HEALTH INSURANCE	40. SOCIAL SECURITY NO						
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA								
45. POSITION CONTROL CERTIFICATION				46. OFF APPROVAL				DATE APPROVED			
								05-22-69			

FORM 1152 USE PREVIOUS EDITION

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 24 APRIL 69	
1. SERIAL NUMBER <div style="border: 1px solid black; width: 100px; height: 20px;"></div>		2. NAME (Last-First-Middle) <div style="border: 1px solid black; width: 150px; height: 20px;"></div>			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 18 69		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div>	V TO V <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	X <div style="border: 1px solid black; width: 20px; height: 20px;"></div>	V TO C <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	7. FINANCIAL ANALYSIS NO. CHARGEABLE 9135 0990	8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/WH Foreign Field Branch I <div style="border: 1px solid black; width: 100px; height: 20px;"></div>			10. LOCATION OF OFFICIAL STATION <div style="border: 1px solid black; width: 150px; height: 20px;"></div>		
11. POSITION TITLE OPS OFFICER (141)			12. GRADE AND STEP 0340		13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS		15. OCCUPATIONAL SERIES 0136.01		17. SALARY OR RATE \$ 19771	
16. REMARKS FROM: DDP/WH/CA STAFF/POS. #0645 VICE ALBERT F. REYNOLDS 1 - Finance <div style="border: 1px solid black; width: 150px; height: 30px;"></div> C/WH/Personnel					
18A. DATE SIGNED 4-24-69		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <div style="border: 1px solid black; width: 100px; height: 30px;"></div>		18C. DATE SIGNED 4-24-69	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 51620/WH	22. STATION CODE 45025	23. INTEREST CODE 3	24. POSTING CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>
25. DATE OF BIRTH MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	26. DATE OF GRADE MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	27. DATE OF HI MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	28. SECURITY REG. CO. 14 SEE EOD DATA →		
29. RET. EXPENSE MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	30. SPECIAL REFERENCE - CSC - DCA - FICA - ACPL	31. RETIREMENT DATA CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	32. SEPARATION DATA CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	33. CORRELATION/PERMANENT DATA TYPE MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	34. SOCIAL SECURITY NO. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>
35. NET PREFERENCE CODE 1-99 1-99 1-99	36. SERV. COMP. DATE MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	37. LONG. COMP. DATE MO. DA. YR. <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	38. CAREER CATEGORY CAP. STEP CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	39. FLCA/HEALTH INSURANCE CODE 1-99 1-99	40. HEALTH INS. CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1-99 1-99 1-99		42. LEAVE BAL. CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	43. RESERVE TAX DATA CODE 1-99 1-99	44. STATE TAX DATA CODE 1-99 1-99	45. STATE CODE <div style="border: 1px solid black; width: 50px; height: 20px;"></div>
46. POSITION CONTROL INFORMATION 04-28-69			47. CP APPROVAL <div style="border: 1px solid black; width: 100px; height: 30px;"></div>		
48. DATE APPROVED 04-28-69			49. DATE APPROVED 04-28-69		

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

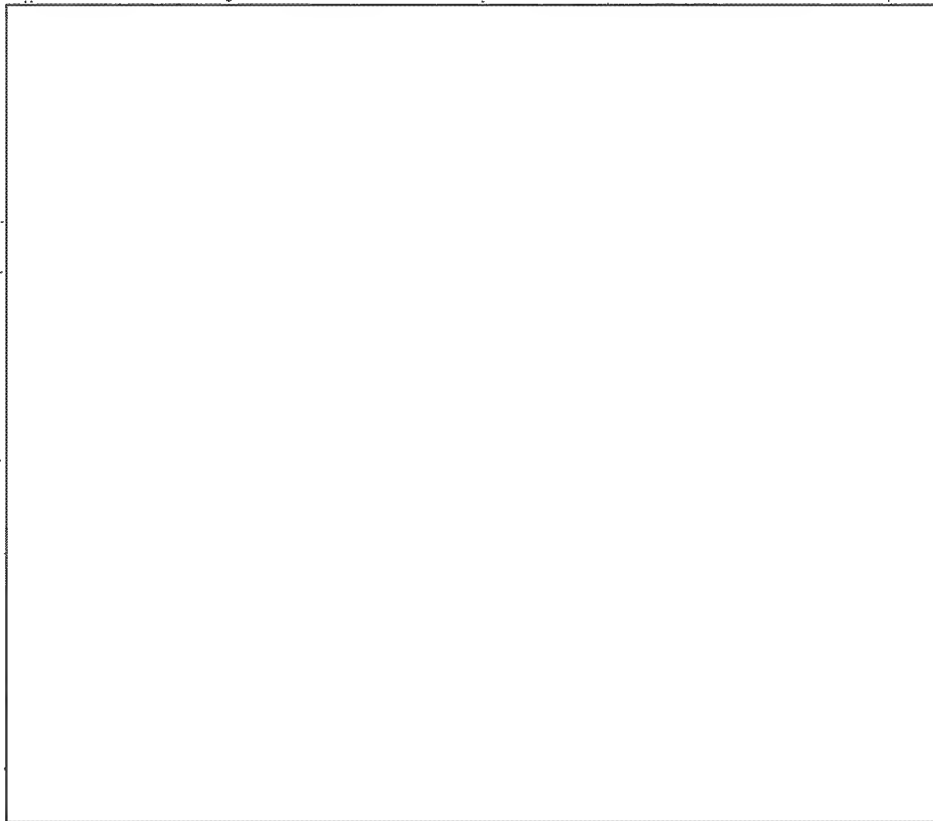
SECRET

NR-1198

17 June 1968

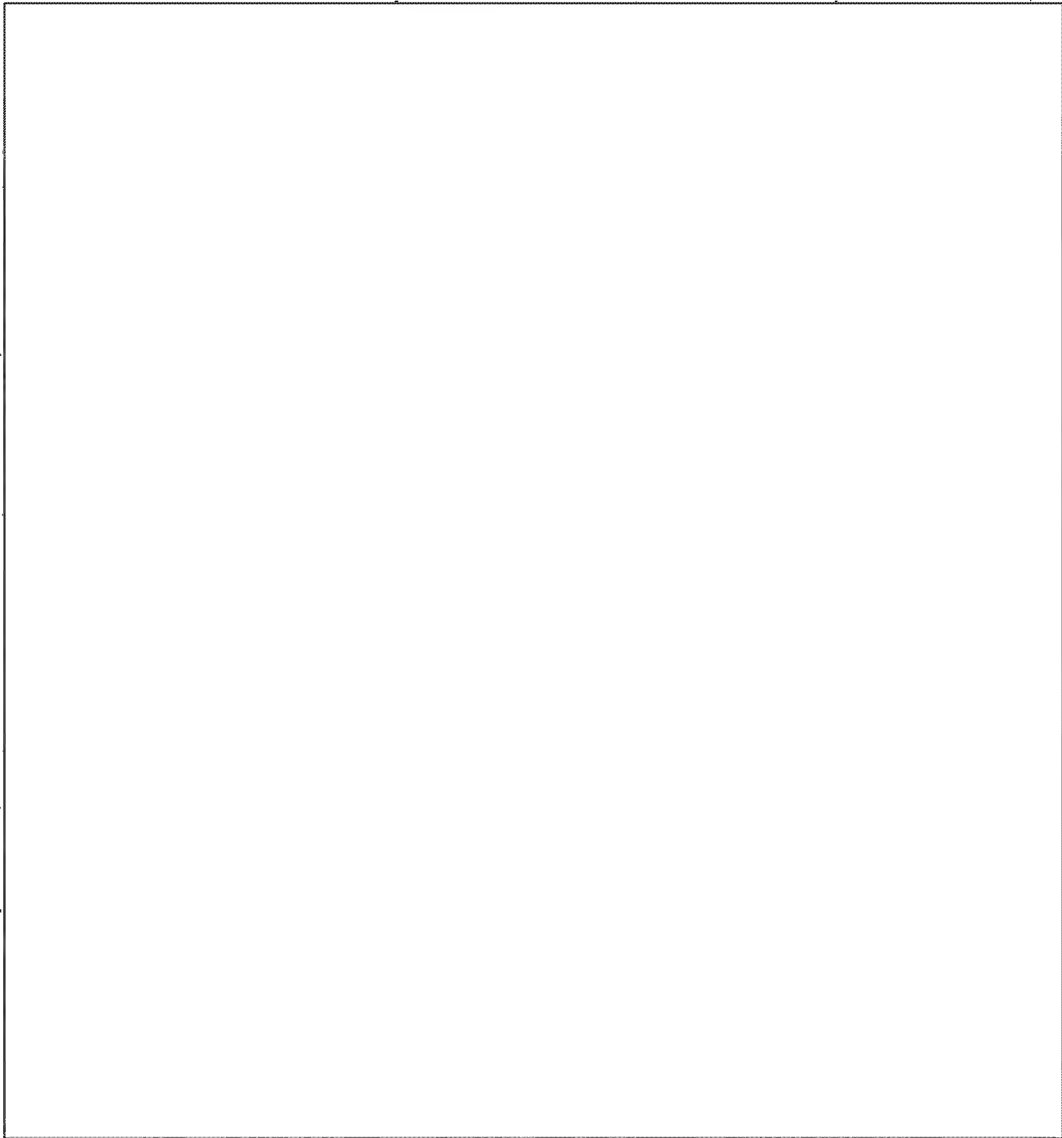
MEMORANDUM FOR: Chairman, Clandestine Services Career
Service Board (Panel A)

SUBJECT : - Recommendation for
Promotion from GS-14 to GS-15



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SECRET



- 2 -

SECRET

SECRET



- 3 -

SECRET

SECRET

100-1965

AUG 11 1965

MEMORANDUM FOR: Director of Training

SUBJECT: Statement of Appreciation -

1. We wish to take this means and opportunity to express formally and for the record the appreciation of the

3. The enthusiastic reception and endorsement of these two courses, the quality attendance by Division officers, and the participation by senior Division officers as speakers, attest to the need for new courses and the success of these endeavors.

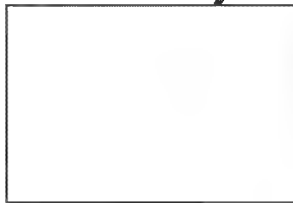
4. Those of us who had the opportunity to work closely with learned to appreciate his vitality, flexibility and personal commitment to the success of these training innovations. The contribution they have already made, and will continue to make, to the Agency's training program are testimony to the role that he played in devising and implementing them.

CA-68-904

SECRET

SECRET

5. I suggest that you forward this letter to Chief, WH so that it may be made a part of permanent personnel record.



SECRET

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				21 June 1968	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED	
REASSIGNMENT				MO. DAY YEAR 06 4 30 68	
5. CATEGORY OF EMPLOYMENT				REGULAR	
6. FUNDS				7. FINANCIAL ANALYSIS NO. (CHARGEABLE)	
X V TO V				8295-0820	
C TO V				8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION	
DDP/WH				WASHINGTON D.C.	
11. POSITION TITLE				12. POSITION NUMBER	
OPS OFFICER (M)				0845	
13. CLASSIFICATION SCHEDULE (GS, E.R., etc.)				14. GRADE AND STEP	
GS				14 6	
15. OCCUPATIONAL SERIES				16. SALARY OR RATE	
0136.01				19771	
17. REMARKS					
<p>FROM: DDS/OTR/Operations School/1314.</p> <p>VICE: [Redacted]</p> <p>OTR/PERS. [Redacted] (phone)</p> <p>1 - Finance</p> <p>1 - Security</p> <p>Security Approval Requested by Pers. SB/SSG/26/68 66-7/5/68</p>					
DATE SIGNED					1 July 68
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
18. MEDICAL CODE	19. EMPLOY CODE	20. OFFICE CODING	21. STATUS CODE	22. INTEGRITY CODE	23. REPORT CODE
37	10	5130 WH	25013		
24. DATE OF BIRTH	25. DATE OF GRADE	26. DATE OF PAY	27. DATE OF PAY	28. DATE OF PAY	29. DATE OF PAY
30. SPECIAL REFERENCE	31. RESIGNMENT DATA	32. SEPARATION DATA CODE	33. SEPARATION DATA CODE	34. SEPARATION DATA CODE	35. SEPARATION DATA CODE
36. TEST PREFERENCE	37. VERY LONG DATE	38. LONG DATE	39. LONG DATE	40. LONG DATE	41. LONG DATE
42. PREVIOUS OFFICIAL GOVERNMENT SERVICE	43. LEAVE BAL	44. LEAVE BAL	45. LEAVE BAL	46. LEAVE BAL	47. LEAVE BAL
48. POSITION CONTROL CERTIFICATION	49. CLP APPROVAL	50. CLP APPROVAL	51. CLP APPROVAL	52. CLP APPROVAL	53. CLP APPROVAL

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

15-0382-28

SECRET

MEMORANDUM FOR: [REDACTED]

VIA : Director of Training

SUBJECT : Next Assignment

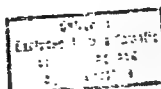
1. We wish to advise you that the Clandestine Services Career Service approves your next assignment to WH Division upon completion of your current tour with the Office of Training.

2. The Clandestine Services appreciates your excellent performance in your current assignment and wishes you continuing success.

[REDACTED]

DDP/bp

SECRET



SECRET

16 AUG 1967

MEMORANDUM FOR : Director of Training
Room 810
1000 Glebo Road

SUBJECT : Training of Military Officers
in Covert Psychological Warfare
Techniques

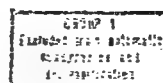
1. In response to my request of 2 May 1967 your Office did an extremely fine job in organizing and conducting the training course for the military officers who will be going to Saigon to work with Agency personnel in psychological warfare. Special note should be taken of the efforts of [redacted] of your Office, who organized the course and provided not only the impetus for the program but also the catalysis for a very enthusiastic response from the students.

2. The group of trainees have been requested to provide a critique of the course after they have settled into their jobs in Saigon in order to determine how well the course material fitted their assignments. We will forward copies of these critiques as they become available.

3. Again let me express my appreciation for your very effective support.

Douglas S. Blaufarb
Douglas S. Blaufarb
Chief, Vietnam Operations

SECRET



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 22 September 1966	
1. SERIAL NUMBER <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. NAME (Last-First-Middle) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
3. NATURE OF PERSONNEL ACTION Excepted Appointment <i>CAVU</i>			4. EFFECTIVE DATE REQUESTED MONTH: 10 DAY: 09 YEAR: 66		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="display: flex; flex-direction: column; gap: 5px;"> <div>V TO V</div> <div>CF TO V</div> </div> </div>			7. FINANCIAL ANALYSIS NO. CHARGEABLE 7375-3000		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDE/OTR Operations School Headquarters Training Branch Operations Faculty			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Instr Operations <i>(14)</i>			12. POSITION NUMBER 1314		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, IN...) GS		15. OCCUPATIONAL SERIES 1712.32		16. GRADE AND STEP 14 5	
17. SALARY OR RATE \$17,198					
18. REMARKS <i>C-09-54</i>					
DATE SIGNED <i>23 Sept 66</i>			DATE SIGNED <i>14 Oct 66</i>		
SPACE BELOW FOR EXCLUSIVE USE					
19. ACTION CODE 1310		20. EMPLOY CODE 0600		21. OFFICE CODES NUMERIC: 0600 ALPHABETIC: NR	
22. STATION CODE 75113		23. INTEGRITY CODE		24. MODERATION CODE	
25. DATE OF BIRTH MO. DA. YR.		26. DATE OF MARRIAGE MO. DA. YR.		27. DATE OF DEATH MO. DA. YR.	
28. DATE OF ENTRY MO. DA. YR.		29. SPECIAL EMPLOYMENT CODE		30. RETIREMENT DATA CODE: 2	
31. SEPARATION DATA CODE		32. CORRECTION/REINTEGRATION DATA TYPE: MO. DA. YR.		33. SECURITY DATA EOD DATA → 00000	
34. VET PREFERENCE CODE: 1		35. SICK LEAVE DATA MO. DA. YR. 10/23/62		36. LONG COMP DATA MO. DA. YR. 12/15/61	
37. CAREER CATEGORY CODE: 1		38. PETS HEALTH INSURANCE CODE: 1		39. SOCIAL SECURITY NO.	
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 1		41. LEAVE CAT. CODE: 6		42. FEDERAL TAX DATA FORM EXECUTED: CODE: 0	
43. POSITION CONTROL CERTIFICATION 10-17-66 US		44. STATE TAX DATA FORM EXECUTED: CODE: 0		45. DATE APPROVED <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	

FORM 1152 USE PREVIOUS EDITION

SECRET


GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

I have found for

DATE PREPARED

1. SERIAL NUMBER	2 NAME / PLACE / DATE
J. N.	

3 CATEGORY OF EMPLOYMENT

6. FUNDS		V TO V		V TO C
		C TO V	XX	C TO C

LEGAL AUTHORITY (Completed by Office of Personnel)

10. LOCATION OF OFFICIAL STATION

--

2 POSITION NUMBER

13. CAREER SERVICE DESIGNATION

14. CLASSIFICATION SCHEDULE (G.S. 1.B. (ii))

13. OCCUPATIONAL SERIES

18. GRADE AND STEP

17. SALARY OR RATE
1000

10. REMARKS

14.5

17198

--

1 - Security
1 - Finance

1 - Finance

DATE SIGNED

26 Sept 66

12	DATE SIGNED
----	-------------

1 + 2 = 3

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL.

FORM 1152 USE PREVIOUS EDITIONS

SECRET

G 53

SECRET

(U) Not Filled In

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
XYP				21 February 1966	
1. SERIAL NUMBER					
2. NAME (Last, First, Middle)					
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM					
4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 03 13 66			5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS V TO V C TO V X C TO C			7. COST CENTER NO. CHARGE-ABLE 6135-0633		
8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203			9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD UNASSIGNED		
10. LOCATION OF OFFICIAL STATION			11. POSITION TITLE OPS OFFICER		
12. POSITION NUMBER 0000			13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SYMBOL (GS, I, II, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 14 5	
17. SALARY OR RATE \$ 16,712		18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
19A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
DATE SIGNED					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC 51623 WH	22. STATION CODE 04041	23. INTEGRITY CODE	24. HOURS CODE 3
25. DATE OF BIRTH MO. DA. YR. 12 23 62	26. DATE OF GRADE MO. DA. YR. 12 19 65	27. DATE OF LIT	28. SECURITY 710 NO.	29. SEX	
30. RETIREMENT DATA 1-CR 2-FCR 3-ROSE	31. SITUATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR. EOD DATA	33. SOCIAL SECURITY NO.		
34. VET. PREFERENCE CODE 1-NO 2-YES 1-5 2-20 3-40	35. LONG. COMP. DATE MO. DA. YR.	36. LONG. COMP. DATE MO. DA. YR.	37. CAREER CATEGORY CODE 1-YES 2-NO	38. FEDERAL HEALTH INSURANCE CODE 1-YES 2-NO	39. SOCIAL SECURITY NO.
40. METHOD OF SERVICE DATA CODE 1-NO PREVIOUS SERVICE 2-NO ORIGIN OF SERVICE 3-ORIGIN & SERVICE (LESS THAN 3 YEARS) 4-ORIGIN & SERVICE (MORE THAN 3 YEARS)	41. LEAVE CAT CODE	42. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	43. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	44. DATE APPROVED	
45. POSITION CONTROL CERTIFICATION 0301-66-11			46. OF APPROVAL See memo signed by 2/24/66 dated 16 FEB 1966		

FORM 1152 USE PREVIOUS EDITION

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 25 APRIL 1963	
1. SERIAL NUMBER 7794 035155		2. NAME (Last-First-Middle) Smith, Joseph B.			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH 05 DAY 12 YEAR 63		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS 		V TO V	V TO CF	7. COST CENTER NO. CHARGE-ABLE 3135-5050-1000	
CF TO V		<input checked="" type="checkbox"/> CF TO CF	8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 2 BUENOS AIRES, ARGENTINA STATION EE UNIT			10. LOCATION OF OFFICIAL STATION BUENOS AIRES, ARGENTINA		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0651		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LR, etc.) GS		15. OCCUPATIONAL SERIES 016.01		16. GRADE AND STEP 11 3	
17. SALARY OR RATE \$ 13695		<input checked="" type="checkbox"/>			

18. REMARKS

FROM: DDP/WH/2/BUENOS AIRES/BAF-848

Received by
CSE-D
SM

19. SIGNATURE OF OFFICIAL <i>Robert D. Cashman</i> ROBERT D. CASHMAN, C/WH/PERS		DATE SIGNED 4/25/63		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>John Collins</i>		DATE SIGNED 29 Apr 63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE 37	22. EMPLOY CODE 10	23. OFFICE CODE NUMERIC 64652 ALPHABETIC 7CH	24. STATE OR CODE 016041	25. INTEREST CODE 3	26. DATE OF BIRTH 24/1/21	27. DATE OF DEATH	28. DATE OF LEAVE
29. VTS EMPLOY		30. SPECIAL REFERENCE	31. RETIREMENT DATA	32. SEPARATION DATA CODE	33. CORRECTION CANCELLATION DATA	34. SECURITY REQ. NO.	35. SEC
36. SER. EMP. DATE		37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEEL. / HEALTH INSURANCE	40. SOCIAL SECURITY NO.		
41. PREVIOUS GOVERNMENT SERVICE DATA		42. RELEASE CAT. CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA	45. POSITION CONTROL CERTIFICATION		
46. O.P. APPROVAL <i>W. Kearney</i> 05/06/63		47. DATE APPROVED 29 Apr 63					

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 18 DECEMBER 1962	
1. SERIAL NUMBER XB		2. NAME (Last, First-Middle) [REDACTED]				
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH 12 DAY 23 YEAR 62		
				5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS V TO V CF TO V X CF TO CF		7. COST CENTER NO. CHARGE-ABLE 3135-5050-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 2				10. LOCATION OF OFFICIAL STATION [REDACTED]		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0848		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LN, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 14 3		
17. SALARY OR RATE 15.685						
18. REMARKS FROM: SAME						
[REDACTED]		DATE SIGNED 18 Dec 62		19. SIGNATURE OF CAREER SERVICE APPROVING [REDACTED]		
[REDACTED]		DATE SIGNED 18 Dec 62		[REDACTED]		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
1. ACTION CODE 22	2. EMPLOY CODE 10	3. OFFICE CODE 64650	4. STATION CODE WH	5. INTEREST CODE 04041	6. MONTH CODE 3	
7. DATE OF BIRTH 12/23/62	8. DATE OF GRAD 12/23/62	9. DATE OF LET 12/23/62	10. DATE OF LET 12/23/62			
11. DATE EXPIRES 180		12. REFERENCE 180		13. DATA EOD DATA		
14. PREFERENCE 1		15. LONG. EMP. DATE 12/23/62		16. CAREER CATEGORY 1		
17. SOCIAL SECURITY NO. 180		18. HEALTH INSURANCE 1		19. SOCIAL SECURITY NO. 180		
20. PREVIOUS EMPLOYMENT SERVICE DATA 1		21. INTERNAL CODE 1		22. FEDERAL TAX DATA 1		
23. STATE TAX DATA 1		24. STATE TAX DATA 1		25. STATE TAX DATA 1		
26. POSITION CONTROL CERTIFICATION 12/20/62		27. DATE APPROVED 17 Dec 62		28. DATE APPROVED 17 Dec 62		

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 5 April 1962	
1. SERIAL NUMBER 036455		2. NAME (Last, First, Middle) Smith, Joseph O.			
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT Cause			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 27 62		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS 	V TO V	V TO CF	7. COST CENTER NO. CHANGEABLE 2135-5050-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 2 BUENOS AIRES, ARGENTINA STATION			10. LOCATION OF OFFICIAL STATION BUENOS AIRES, ARGENTINA		
11. POSITION TITLE OPERATIONS OFFICER (D)			12. POSITION NUMBER *RAF-848	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (DS, GS, etc.) GS (12)		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 455	17. SALARY OR RATE \$ 1,675	
18. REMARKS C-09/54 *Personal rank assignment in accordance with HR 20-21b.(2) for a maximum period of two years. The only qualified person available for assignment to a position which must be filled immediately. <div style="text-align: right; margin-top: 10px;">Approved: for Chairman, Pmc <i>Charles W. Bowen</i> 25 Apr '62</div>					
19a. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> P. C. BOWERS			19b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
20. ACTION CODE 13	21. EMPLOY CODE 10	22. OFFICE ROUTING ALPHABETIC 64659 WH 00011	23. STATE IN CODE 3	24. MONTHS 06/16/21	25. DATE OF YEAR 10 09 55
26. DATE EXPIRES MO. DAY YEAR 80		27. RETIREMENT DATA 1 = CSC 3 = FICA 5 = NONE 1	28. SEPARATION DATA CODE 1	29. CONGRESSIONAL REFERENCE DATA MO. DAY YEAR 06 16 21	
30. SET PREFERENCE 1 = NONE 2 = 5 yrs. 3 = 10 yrs. 1		31. LONG. EMP. DATE MO. DAY YEAR 10 09 48	32. MIL. SERV. ESTABLISHED 1 = YES 2 = NO 1	33. FIELD / HEALTH INSURANCE 1 = YES 2 = NO 1	
34. PREVIOUS GOVERNMENT SERVICE DATA 1 = NO PREVIOUS SERVICE 2 = NO BREAK IN SERVICE 3 = BREAK IN SERVICE (LESS THAN 12 MOS) 4 = BREAK IN SERVICE (MORE THAN 12 MOS) 1		35. LEAVE DATA CODE 6	36. FEDERAL TAX DATA FORM EXECUTED 1 = YES 2 = NO 0	37. STATE TAX DATA FORM EXECUTED 1 = YES 2 = NO 0	
38. POSITION CONTROL CERTIFICATION EO			39. O.P. APPROVAL <i>[Signature]</i> 26 APR 62		

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 5 April 1962	
1. SERIAL NUMBER <div style="border: 1px solid black; height: 15px; width: 100px;"></div>		2. NAME (Last-First-Middle) <div style="border: 1px solid black; height: 15px; width: 200px;"></div>					
3. NATURE OF PERSONNEL ACTION RESIGNATION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 13 62		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <input checked="" type="checkbox"/> V. TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		7. COST CENTER NO. CHARGEABLE 2235-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 1 <div style="border: 1px solid black; height: 15px; width: 100px;"></div>				10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.			
11. POSITION TITLE OPERATIONS OFFICER (A)				12. POSITION NUMBER BO 505		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS (A)		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 245		17. SALARY OR PAY 11575	
18. REMARKS <div style="text-align: center; margin-top: 50px;">RECEIVED CPS <i>[Signature]</i></div>							
DATE SIGNED <div style="border: 1px solid black; height: 20px; width: 100px;"></div>				100. SIGNATURE OF CAREER SERVICE APPROVING <div style="border: 1px solid black; height: 20px; width: 100px;"></div>			
DATE SIGNED 28 April 62							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 44 10		20. OFFICE LOCATION ALPHABETIC 10000931		21. POSITION CODE 1		22. DATE OF ACTION MO. DA. YR. 05 13 62	
23. DATE OF EXPIRY MO. DA. YR. 05 13 62		24. SPECIAL REFERENCE 10000931		25. SEPARATION DATA CODE 10000931		26. DATE OF CANCELLATION MO. DA. YR. 05 13 62	
27. PREVIOUS GOVERNMENT SERVICE DATA CODE 1		28. SEPARATION DATA CODE 1		29. SOCIAL SECURITY NO. 10000931		30. DATE OF ACTION MO. DA. YR. 05 13 62	
31. PREVIOUS GOVERNMENT SERVICE DATA CODE 1		32. SEPARATION DATA CODE 1		33. SOCIAL SECURITY NO. 10000931		34. DATE OF ACTION MO. DA. YR. 05 13 62	
35. POSITION CONTROL CERTIFICATION <div style="border: 1px solid black; height: 20px; width: 100px;"></div>				36. O.P. APPROVAL <div style="border: 1px solid black; height: 20px; width: 100px;"></div>			

SECRET

(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE _____ FOR THE FOLLOWING REASON:
(Date)

MY LAST WORKING DAY WILL BE:

DATE SIGNED

S

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO

(State)

INSTRUCTIONS

Items 1 thru 7 and Items 9 thru 18a - The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains only to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary - Part Time		

Item 9 - "Organizational Designations" should show all levels of organization pertinent to identifying the location of the position:

FIRST LINE - Major Component (Director, Deputy Director, etc.)
Office, Major Staff, etc.
Division or Staff (subordinate to first line)
Branch
Section
Unit

Item 11 - "Position Title" should reflect the standard abbreviated title given in the most current edition of the Position Control Register or reported on Form 261, Staffing Complement Change Authorization.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the gaining Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING - The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval or notification to the Office of Security or the Office of the Comptroller, one copy only will be sent to the Office(s) concerned.

SECRET

~~SECRET~~

F04W 1152

45

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED																			
1. SERIAL NUMBER		2. NAME (Last-First-Middle)								19 July 1961																			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT										4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT																	
										MONTH DAY YEAR 06 27 61		REGULAR																	
6. FUNDS		X		V TO V				V TO CF		7. COST CENTER NO. CHARGEABLE 2235 1000 1000																			
				CF TO V				CF TO CF																					
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 1										10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.		11. POSITION TITLE																	
												OPS OFFICER (D)																	
12. POSITION NUMBER				13. PCN CONTROL NO.				14. CAREER SERVICE DESIGNATION																					
10-459								D																					
15. CLASSIFICATION SCHEDULE (GS, LP, etc.)				16. OCCUPATIONAL SERIES				17. GRADE AND STEP																					
GS (13)				0136.01				13 4																					
18. REMARKS										19. SALARY GRADE																			
(FROM: DDP [redacted])										11415																			
1 copy to Security.																													
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>Retention date is 10/11/61</p> <p>Security Approval Granted by Pers. SD/OS 7/26/61</p> </div> <div style="text-align: right;"> <p>CONCURRENCE:</p> <p>[Signature]</p> </div> </div>																													
<div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> <p>SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>1. ACTION CODE</th> <th>2. EMPLOY CODE</th> <th>3. OFFICE CODING</th> <th>4. STATE CODE</th> <th>5. RESERVE CODE</th> <th>6. HONORARY CODE</th> <th>7. DATE OF BIRTH</th> <th>8. DATE OF DEATH</th> <th>9. DATE OF LEAVE</th> </tr> </thead> <tbody> <tr> <td>37</td> <td>10</td> <td>64300</td> <td>W/H</td> <td>75013</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> </div>												1. ACTION CODE	2. EMPLOY CODE	3. OFFICE CODING	4. STATE CODE	5. RESERVE CODE	6. HONORARY CODE	7. DATE OF BIRTH	8. DATE OF DEATH	9. DATE OF LEAVE	37	10	64300	W/H	75013				
1. ACTION CODE	2. EMPLOY CODE	3. OFFICE CODING	4. STATE CODE	5. RESERVE CODE	6. HONORARY CODE	7. DATE OF BIRTH	8. DATE OF DEATH	9. DATE OF LEAVE																					
37	10	64300	W/H	75013																									

REQUEST FOR PERSONNEL ACTION												
12 Sept. 1960												
1. Ser. No.		2. Name (Last-First-Middle)			3. Date Of Birth		4. Vol. Pref. Non-0 5 Pt-1 10 Pt-2		5. Sex M 1		6. CS - EOD Mo. Da. Yr. 09 17 51	
7. SCD		8. CSC Reim.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.		11. FEGLI		12. LCD		
Mo. Da. Yr. 10 03 48		Yes-1 No-2 1		50 USCA 403		Mo. Da. Yr. Mo. Da. Yr.		Yes-1 No-2 09 17 51		Yes-1 No-2 09 17 51		

PREVIOUS ASSIGNMENT											
14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP				4230		WASH., D.C.				75013	
16. Dept. - Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. USfld. Frgn.		OPS OFFICER				0399		GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
13 4		\$ 11415 10610		D		Mo. Da. Yr. 10 09 55		Mo. Da. Yr. 10 01 61		0221 1000 1000	

ACTION											
27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
Reassignment		37		Mo. Da. Yr. 10 01 60		Regular		10			

PRESENT ASSIGNMENT											
31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP						Wash., D. C.				75013	
33. Dept. - Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. USfld. Frgn.		Ops Officer				V 356		GS		0136.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
13 4		\$ 11415		D -		Mo. Da. Yr. 10 09 55		Mo. Da. Yr. 10 10 61		1221-1000-1000	
44. For Additional Information Call (Name & Telephone Ext.) Betty R. Weyland x 3625											
45. CLEARANCES											
Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Record				32/1/60		Clearance					
B. Per. Control				3-27-60		Clearance					
C. Classification						Approved By					
Remarks Action to correct slotting.											

V to V		V to UV		SECRET (When Filled In)	COPY REQUEST FOR PERSONNEL ACTION				DATE PREPARED				
UV to V		UV to UV						Mo	Da	Yr			
1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth		4. Vet. Pref		5. Sex		6. C. I. C. D.		
					Mo. Da. Yr.		None-0 5 Pt-1 10 Pt-2		Code		Mo Da Yr		
							H A				09 17 51		
7. SCD		8. CSC Code		9. CSC Or Other Legal Authority		10. Appt. Authority		11. FEGLI		12. LCD		13. Code	
Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.		Yes-1 No-2		Code		Mo Da Yr	
10 03 48		1		50 USCA 403 J				1 09 17 51				2	

CURRENT ASSIGNMENT

14. Organizational Designation				Code		15. Location Of Official Station				Station Code	
DDP FE Branch 3 PP Section				5161						57557	
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv		20. Occup. Series			
Dept. - USMA Figs.		Code		Ops Off		0710		GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.	
13 4		5 10610		DP		10 09 55		10 05 58		8 3780 55 006	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
Reassignment & Transfer to Vouchered Funds		02		05 18 60		Regular		01			

PROPOSED ASSIGNMENT

31. Organizational Designation				Code		32. Location Of Official Station				Station Code	
DDP				4230		Wash., D. C.				75013	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv		37. Occup. Series			
Dept. - USMA Figs.		Code		Ops Officer		0399		GS		0136.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.		Mo. Da. Yr.	
13 4		5 10610		D		10 09 55		10 01 61		0221 1000 1000	

SOURCE OF REQUEST

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)		Date Approved	

CLEARANCES

Clearance		Signature		Date	
A. Legal Board					
B. For Control					
C. Classification					

Two copies to Security

CONCUR:

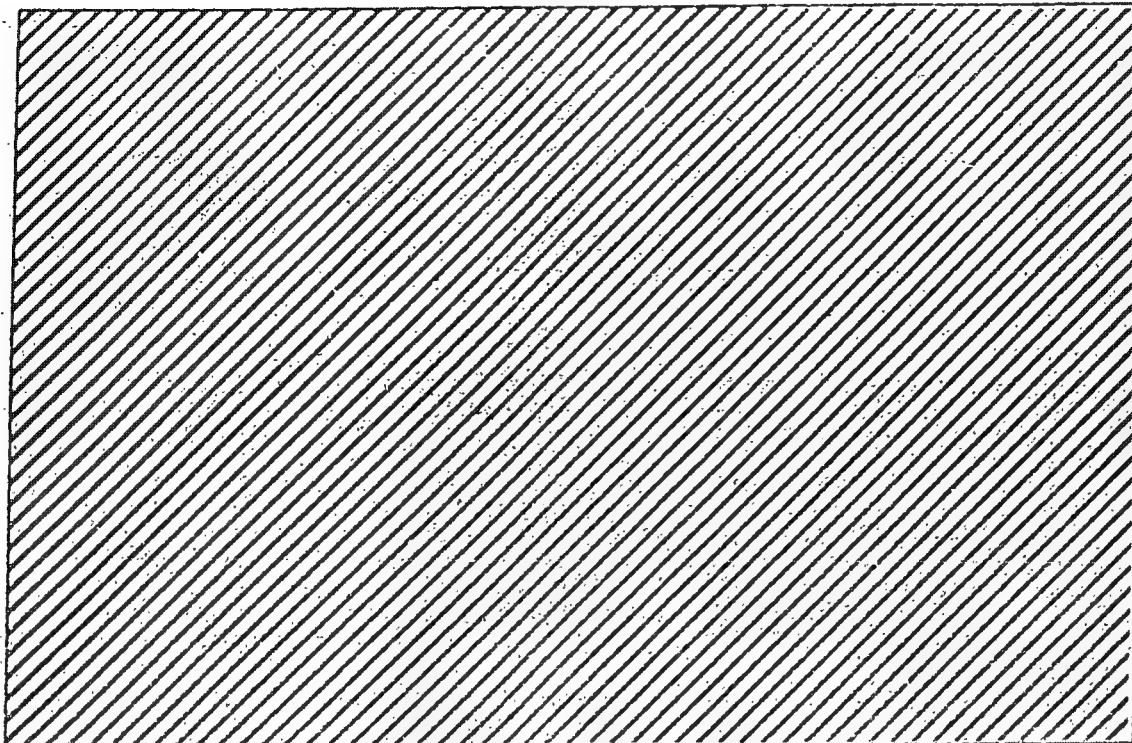
☐ Continued ☐ Section 512a

1152

SECRET

SECRET

(When Filled In)



NAME OF EMPLOYEE (Last, First, Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
<div style="background-color: black; width: 100%; height: 20px;"></div>		59-44D

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 16 September 1958

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF
28 SEP 1958	<div style="background-color: black; width: 100%; height: 20px;"></div>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

REQUEST FOR PERSONNEL ACTION														3 February 1958			
1. Serial No.		9. Name (Last-First-Middle)				3. Date Of Birth			4. Ver. Prod.		5. Sex		6. C. E. D.				
						Mo. Da. Yr.			Non-1 5-1 10-2		Code		Mo. Da. Yr.				
7. SCD		8. CSC Reim.		9. CSC Or Other Legal Authority		10. Appt. Affidavit			11. FEGLI		12. LEO		13. Other				
Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.			Yes-1 No-2		Code		Mo. Da. Yr.				

PREVIOUS ASSIGNMENT											
14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
OFFICE OF THE CHIEF				121		MAG. S. C.				12018	
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - USM - Fgn -		AREA OPS OF D. E. R. C.		332		13		0136.31			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
12 2		\$				Mo. Da. Yr.		Mo. Da. Yr.		570.2	

ACTION											
27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Code	
Reassignment (V to UV)		35		02 07 58		OK P. FE Regular		51			

PRESENT ASSIGNMENT											
31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP/FE Branch 3 - FP Section				5161						57557	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - USM - Fgn -		Ops Off (FP)		710		GS		0136.31			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
S						Mo. Da. Yr.		Mo. Da. Yr.		B-3780-55-006	

SOURCE OF REQUEST			
A. Request Approved By		Signature And Initials	
C. Request Approved By		Signature And Initials	
D. Request Approved By		Signature And Initials	
E. Request Approved By		Signature And Initials	
F. Request Approved By		Signature And Initials	
CLEARANCES			
A. Career Board		Signature	
B. Post Control		Signature	
C. Classification		Signature	
D. Placement		Signature	
E. Approved By		Signature	
F. Approved By		Signature	
Remarks: 2 copies to Security. W44 DU attached			

SECRET

(When Filled In)

DD/P PERSONNEL DATA SHEET

NAME: [REDACTED]

AGE: [REDACTED]

DATE: 3 FEB 1958

AND DUTIES: OPS OFF (PP)

DD/P UNIT: FE
REASSIGNMENT

PRIMARY CAREER

DESIGNATION: DP

PRESENT GRADE: GS-13

PRESENT T/O SLOT: BF-3369

PROPOSED GRADE: GS-13

NUMBER AND GRADE: GS-14

CIA TRAINING: ORIENT, BASIC & ADVANCED PSYCH.

WARFARE SEMINAR, F&S BRIEFING, BOC,
CPO, OC,

PROPOSED T/O SLOT: BFF-710

NUMBER AND GRADE: GS-14

EDUCATION: 1943 HARVARD, AB IN HISTORY; 1943-44 YALE, 36 SEM HRS IN FE
POLITICS; 1947-48 JOHNS HOPKINS, 6 SEM HRS GOVT; 1950 U OF PENN, MA IN
LANGUAGE PROFICIENCY: JAPANESE-LIMITED; GERMAN-LIMITED HISTORY

ASSESSED:

DATE:

TYPE OF POSITION:

RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-OSS):

1943-46 JAPANESE LANGUAGE SPECIALIST, US ARMY

1946-51 ASST PROFESSOR OF HISTORY, DICKINSON COLLEGE

RECOMMENDED BY: [REDACTED]

CONCURRENCES:

[REDACTED], CFE/3

RECOMMENDATION OF CAREER SERVICE BOARD:

REQUEST FOR PERSONNEL ACTION 24 JUL 1957													
1. Serial No.		2. Name (Last-First-Middle)				3. Date of Birth		4. Fed. Post.		5. Sex		6. CS - EDD	
						Mo Da Yr		Code		M		Mo Da Yr	
7. SCD		8. CSC Retire		9. CSC Or Other Legal Authority		10. Appr. Aff. Code		11. FICL		12. LCD		13. Cert. Lg.	
Mo Da Yr		Yes - 1 Code				Mo Da Yr		Yes - 1 Code		Mo Da Yr		Yes - 1 Code	
		No - 2											

PREVIOUS ASSIGNMENT

14. Organisational Designations				Code		15. Location of Official Station				Station Code	
DDP/FE Branch 5 Office of the Chief						Washington, D.C.					
16. Dept. Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Code		Area Ops Off (Ch)		303		GS		0136.01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date of Grade		25. PSI Code		26. Appropriation Number	
13 2		\$9205.00		DP		Mo Da Yr		Mo Da Yr		B-3700-20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Reassignment				Mo Da Yr		Regular					

PRESENT ASSIGNMENT

31. Organisational Designations				Code		32. Location of Official Station				Station Code	
DDP/FE Branch 5 Office of the Chief				5121		Washington, D.C.				75013	
33. Dept. Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Code		Area Ops Off (D Hr Ch)		310 10		GS		0136.01			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date of Grade		42. PSI Code		43. Appropriation Number	
13 2		\$9205.00		DP		Mo Da Yr		Mo Da Yr		B-3700-20	

SOURCE OF REQUEST

C. Request Approved By (Signature And Title)		D. Request Approved By (Signature And Title)	
[Signature]		[Signature]	
E. Request Approved By (Signature And Title)		F. Request Approved By (Signature And Title)	
[Signature]		[Signature]	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			D. Placement		
B. Pos. Control			E. Approved By		
C. Classification					

Remarks

(When Filled In)

NAME:		AGE:		DATE:	26 SEP 57
-------	--	------	--	-------	-----------

AND DUTIES: AREA OPS OFF.
(D BR CH)

DD/P UNIT: FE
REASSIGNMENT

PRIMAST CAREER
DESIGNATION: DP

PROPOSED GRADE: GS-13

PRESENT T/O SLOT
NUMBER AND GRADE:

BF-303
GS-13/14

CIA TRAINING: ORIENT, BASIC & ADVANCED PSYCH. WARFARE

SEMINAR, F&S BRIEFING, BOC, CFO, OC,

PROPOSED T/O SLOT
NUMBER AND GRADE

BF-3369
GS-14

EDUCATION: AB IN HISTORY, 1943, HARVARD; 36 SEM HRS IN FE POLITICS,
1943-44, YALE; 6 SEM HRS GOV, 1947-48, JOHN HOPKINS; MA, HISTORY, U OF PENN
LANGUAGE PROFICIENCY: JAPANESE - LIMITED; 1950

ASSESSED: DATE: TYPE OF POSITION: RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-OSS):
1943-46, JAPANESE LANGUAGE SPECIALIST, US ARMY
1946-51, ASST PROFESSOR OF HISTORY, DICKINSON COLLEGE

RECOMMENDED BY:

CONFERENCES:

CFE/5

RECOMMENDATION OF CAREER SERVICE BOARD:

NY 116 GM

FORM NO. 965 JAN 1964 EDITION

SECRET

• ICE 97. 618700P55.

S-E-C-R-E-T

This Notice Expires 3 October 1957

**CLANDESTINE SERVICES
NOTICE NO. 1-138**

CSN NO. 1-138

**ORGANIZATION
3 September 1957**

PERSONNEL ANNOUNCEMENT

FE DIVISION

Announcement is made of the appointment, effective

3 September 1957, of [] as Chief, FE/5, vice

[], Acting Chief. [] has resumed

his position of Deputy Chief, FE/5.

**FRANK G. WISNER
Deputy Director (Plans)**

Released by:
Richard Helms
Chief of Operations

S-E-C-R-E-T

~~SECRET~~

This Notice Expires 7 September 1957

CLANDESTINE SERVICES
NOTICE NO. 1-131

CSN NO. 1-131

ORGANIZATION
7 August 1957

PERSONNEL ANNOUNCEMENT

FE DIVISION

Announcement is made of the designation, effective 5 August 1957,
of [] as Acting Chief, FE/5, vice []
reassigned.

FRANK G. WISNER
Deputy Director (Plans)

Released by:
Richard Helms
Chief of Operations

~~SECRET~~

FE/PT

S-E-C-R-E-T

Time Period expires 15 May 1957

ASSIGNMENT TO
FE NOTICE NO. 1-46

ORGANIZATION
20 March 1957

PAR EAST DIVISION NOTICE

SUBJECT: Personnel Assignment

The designation of [redacted] as Acting Deputy Chief,

FE/5 is effective 1 April 1957.

[redacted]
ALFRED C. ULDER, JR. ✓
Chief, Far East Division

Distribution:
FE Staff and Branches
SSA/DEG
RI

S-E-C-R-E-T

S-E-C-R-E-T

This Notice expires 15 May 1957

FE NOTICE NO. 1-46

ORGANIZATION
20 March 1957

PAR EAST DIVISION NOTICE

SUBJECT: Personnel Assignment

Effective 15 April 1957. [redacted] is designated Acting
Deputy Chief, FE/S, vice Mr. [redacted] reassigned.

[redacted]
ALFRED C. ULMER, JR.,
Chief, Far East Division

Distribution:
FE Staffs and Branches
SMA/DIG
RI

S-E-C-R-E-T

STANDARD FORM 52 PREPARED BY THE U. S. CIVIL SERVICE COMMISSION WASHINGTON, D. C. 20535 GSA GEN. REG. NO. 27 MAY 1962 EDITION GSA GEN. REG. NO. 27		UNVOUCHERED VOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. DATE OF BIRTH <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
3. REQUEST NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		4. DATE OF REQUEST 14 Nov. 56	
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	
B. POSITION (Specify whether establish, change grade or title, etc.)		7. C. S. OR OTHER LEGAL AUTHORITY	
FROM: Ops Officer (PP) BFF-923 GS-0136.31-13 \$8990.00 P/A DDP/FE Branch 5 <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		TO: Area Ops Officer (Ch). BF-303-13 GS-0136.01-13 \$8990.00 P/A DDP/FE Branch 5 <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
8. SERVICE GRADE AND SALARY		9. ORGANIZATIONAL DESIGNATIONS	
10. HEADQUARTERS		11. FIELD OR DEPARTMENTAL	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
12. REMARKS (Use reverse if necessary) <div style="font-size: 1.2em; font-family: cursive;"> TRANSFER OF FUNDS UNVOUCHERED TO VOUCHERED W/ ATTACHED 2 copies to Security </div>			
13. VETERAN PREFERENCE NONE <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 PT. <input type="checkbox"/> 15 PT. <input type="checkbox"/> 20 PT. <input checked="" type="checkbox"/> 25 PT. <input type="checkbox"/> 30 PT. <input type="checkbox"/> 35 PT. <input type="checkbox"/> 40 PT. <input type="checkbox"/> 45 PT. <input type="checkbox"/> 50 PT.		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL	
15. APPROPRIATION FROM: 7-3745-55-012 TO: 7-3700-20		16. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	
17. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		18. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED	
19. STANDARD FORM 50 REMARKS <div style="font-size: 1.2em; font-family: cursive;"> FIVE 0-4 </div>			
20. CLEARANCES A. <input type="checkbox"/> B. <input type="checkbox"/> C. <input type="checkbox"/> D. <input type="checkbox"/>		INITIAL OR SIGNATURE <div style="font-size: 1.2em; font-family: cursive;"> [Signature] </div>	
DATE 11/2/56		REMARKS <div style="font-size: 1.2em; font-family: cursive;"> [Handwritten notes] </div>	

SECRET

DD/P PERSONNEL DATA SHEET

NAME:

AGE:

DATE: 14 Sept 56

STATION: Washington, D.C.

AND DUTIES: Area Ops. Off. (Ch.) DD/P UNIT: FE

PRIMARY CAREER

DESIGNATION: SD:DP

PRESENT GRADE: GS-13

PROPOSED GRADE: GS-13

PRESENT T/O SLOT BFF-923

NUMBER AND GRADE GS-13

CIA TRAINING: Orient. 2-5 Oct 51; Basic Psych. Warfare

Seminar - May 52; Advanced Basic Psych Warfare Seminar-
November 52.

PROPOSED T/O SLOT: BF-303

NUMBER AND GRADE: GS-13/14

EDUCATION: 1940-43 - A.B. Harvard University - History, Govt., Economics

1943-44 - Yale, Far East Japanese, Certificate

January 1950 - U. of Pennsylvania, History - M.A.

LANGUAGE PROFICIENCY: Japanese, German

ASSESSED:

DATE:

TYPE OF POSITION:

RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-OSS):

1943-1946 - U.S. Army, Cpl., MIS Japanese Language Specialist

1946-1951 - Asst. Professor of History, Dickinson College, Pennsylvania

RECOMMEND BY:

CONCURRENCES:

RECOMMENDATION OF CAREER SERVICE BOARD:

Subject Prom., GS-13, 9 October 1955
Rank In Grade - 61st of 95

Approved 20 1955

SECRET

STANDARD FORM 52 PREVIOUS EDITIONS BY THE U. S. CIVIL SERVICE COMMISSION JANUARY 1960 - FEDERAL PERSONNEL MANUAL CHAPTER 51		<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">SECRET</div>		UNVOUCHERED	
REQUEST FOR PERSONNEL ACTION					
REQUESTING OFFICER: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and 6B in separation data on reverse.					
1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		3. DATE OF BIRTH <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. REQUEST NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Conversion <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div>		5. EFFECTIVE DATE A. PROPOSED: C.O.B. 25 Aug. 1956 B. APPROVED:		7. C.S. OR OTHER LEGAL AUTHORITY	
6. POSITION (Specify whether establish, change grade or title, etc.) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
FROM: Ops Officer (PP) BFF-923 Info. Officer GS-0136.11-13 \$8990.00 P/A <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div> \$8015.00 P/A DDP/FE Branch 5 <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div>		8. POSITION TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL		TO: Ops Officer (PP) BFF-923 GS-0136.11-13 \$8990.00 P/A DDP/FE Branch 5 <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div>	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL DP			
13. REMARKS (Use reverse if necessary)					
14. REQUEST APPROVED BY Signature: _____ Title: _____					
15. VETERAN PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 1945-1946 <input type="checkbox"/> 1947-1948 <input type="checkbox"/> 1949-1950 <input type="checkbox"/> 1951-1952 <input type="checkbox"/> 1953-1954 <input type="checkbox"/> 1955-1956 <input type="checkbox"/> 1957-1958 <input type="checkbox"/> 1959-1960 <input type="checkbox"/> 1961-1962 <input type="checkbox"/> 1963-1964 <input type="checkbox"/> 1965-1966 <input type="checkbox"/> 1967-1968 <input type="checkbox"/> 1969-1970 <input type="checkbox"/> 1971-1972 <input type="checkbox"/> 1973-1974 <input type="checkbox"/> 1975-1976 <input type="checkbox"/> 1977-1978 <input type="checkbox"/> 1979-1980 <input type="checkbox"/> 1981-1982 <input type="checkbox"/> 1983-1984 <input type="checkbox"/> 1985-1986 <input type="checkbox"/> 1987-1988 <input type="checkbox"/> 1989-1990 <input type="checkbox"/> 1991-1992 <input type="checkbox"/> 1993-1994 <input type="checkbox"/> 1995-1996 <input type="checkbox"/> 1997-1998 <input type="checkbox"/> 1999-2000 <input type="checkbox"/> 2001-2002 <input type="checkbox"/> 2003-2004 <input type="checkbox"/> 2005-2006 <input type="checkbox"/> 2007-2008 <input type="checkbox"/> 2009-2010 <input type="checkbox"/> 2011-2012 <input type="checkbox"/> 2013-2014 <input type="checkbox"/> 2015-2016 <input type="checkbox"/> 2017-2018 <input type="checkbox"/> 2019-2020 <input type="checkbox"/> 2021-2022 <input type="checkbox"/> 2023-2024 <input type="checkbox"/> 2025-2026 <input type="checkbox"/> 2027-2028 <input type="checkbox"/> 2029-2030 <input type="checkbox"/> 2031-2032 <input type="checkbox"/> 2033-2034 <input type="checkbox"/> 2035-2036 <input type="checkbox"/> 2037-2038 <input type="checkbox"/> 2039-2040 <input type="checkbox"/> 2041-2042 <input type="checkbox"/> 2043-2044 <input type="checkbox"/> 2045-2046 <input type="checkbox"/> 2047-2048 <input type="checkbox"/> 2049-2050 <input type="checkbox"/> 2051-2052 <input 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2109-2110 <input type="checkbox"/> 2111-2112 <input type="checkbox"/> 2113-2114 <input type="checkbox"/> 2115-2116 <input type="checkbox"/> 2117-2118 <input type="checkbox"/> 2119-2120 <input type="checkbox"/> 2121-2122 <input type="checkbox"/> 2123-2124 <input type="checkbox"/> 2125-2126 <input type="checkbox"/> 2127-2128 <input type="checkbox"/> 2129-2130 <input type="checkbox"/> 2131-2132 <input type="checkbox"/> 2133-2134 <input type="checkbox"/> 2135-2136 <input type="checkbox"/> 2137-2138 <input type="checkbox"/> 2139-2140 <input type="checkbox"/> 2141-2142 <input type="checkbox"/> 2143-2144 <input type="checkbox"/> 2145-2146 <input type="checkbox"/> 2147-2148 <input type="checkbox"/> 2149-2150 <input type="checkbox"/> 2151-2152 <input type="checkbox"/> 2153-2154 <input type="checkbox"/> 2155-2156 <input type="checkbox"/> 2157-2158 <input type="checkbox"/> 2159-2160 <input type="checkbox"/> 2161-2162 <input type="checkbox"/> 2163-2164 <input type="checkbox"/> 2165-2166 <input type="checkbox"/> 2167-2168 <input type="checkbox"/> 2169-2170 <input type="checkbox"/> 2171-2172 <input type="checkbox"/> 2173-2174 <input type="checkbox"/> 2175-2176 <input type="checkbox"/> 2177-2178 <input type="checkbox"/> 2179-2180 <input type="checkbox"/> 2181-2182 <input type="checkbox"/> 2183-2184 <input type="checkbox"/> 2185-2186 <input type="checkbox"/> 2187-2188 <input type="checkbox"/> 2189-2190 <input type="checkbox"/> 2191-2192 <input type="checkbox"/> 2193-2194 <input type="checkbox"/> 2195-2196 <input type="checkbox"/> 2197-2198 <input type="checkbox"/> 2199-2200 <input type="checkbox"/> 2201-2202 <input type="checkbox"/> 2203-2204 <input type="checkbox"/> 2205-2206 <input type="checkbox"/> 2207-2208 <input type="checkbox"/> 2209-2210 <input type="checkbox"/> 2211-2212 <input type="checkbox"/> 2213-2214 <input type="checkbox"/> 2215-2216 <input type="checkbox"/> 2217-2218 <input type="checkbox"/> 2219-2220 <input type="checkbox"/> 2221-2222 <input type="checkbox"/> 2223-2224 <input type="checkbox"/> 2225-2226 <input type="checkbox"/> 2227-2228 <input type="checkbox"/> 2229-2230 <input type="checkbox"/> 2231-2232 <input type="checkbox"/> 2233-2234 <input type="checkbox"/> 2235-2236 <input type="checkbox"/> 2237-2238 <input type="checkbox"/> 2239-2240 <input type="checkbox"/> 2241-2242 <input type="checkbox"/> 2243-2244 <input type="checkbox"/> 2245-2246 <input type="checkbox"/> 2247-2248 <input type="checkbox"/> 2249-2250 <input type="checkbox"/> 2251-2252 <input type="checkbox"/> 2253-2254 <input type="checkbox"/> 2255-2256 <input type="checkbox"/> 2257-2258 <input type="checkbox"/> 2259-2260 <input type="checkbox"/> 2261-2262 <input type="checkbox"/> 2263-2264 <input type="checkbox"/> 2265-2266 <input type="checkbox"/> 2267-2268 <input type="checkbox"/> 2269-2270 <input type="checkbox"/> 2271-2272 <input type="checkbox"/> 2273-2274 <input type="checkbox"/> 2275-2276 <input type="checkbox"/> 2277-2278 <input type="checkbox"/> 2279-2280 <input 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type="checkbox"/> 2965-2966 <input type="checkbox"/> 2967-2968 <input type="checkbox"/> 2969-2970 <input type="checkbox"/> 2971-2972 <input type="checkbox"/> 2973-2974 <input type="checkbox"/> 2975-2976 <input type="checkbox"/> 2977-2978 <input type="checkbox"/> 2979-2980 <input type="checkbox"/> 2981-2982 <input type="checkbox"/> 2983-2984 <input type="checkbox"/> 2985-2986 <input type="checkbox"/> 2987-2988 <input type="checkbox"/> 2989-2990 <input type="checkbox"/> 2991-2992 <input type="checkbox"/> 2993-2994 <input type="checkbox"/> 2995-2996 <input type="checkbox"/> 2997-2998 <input type="checkbox"/> 2999-3000 <input type="checkbox"/> 3001-3002 <input type="checkbox"/> 3003-3004 <input type="checkbox"/> 3005-3006 <input type="checkbox"/> 3007-3008 <input type="checkbox"/> 3009-3010 <input type="checkbox"/> 3011-3012 <input type="checkbox"/> 3013-3014 <input type="checkbox"/> 3015-3016 <input type="checkbox"/> 3017-3018 <input type="checkbox"/> 3019-3020 <input type="checkbox"/> 3021-3022 <input type="checkbox"/> 3023-3024 <input type="checkbox"/> 3025-3026 <input type="checkbox"/> 3027-3028 <input type="checkbox"/> 3029-3030 <input type="checkbox"/> 3031-3032 <input type="checkbox"/> 3033-3034 <input type="checkbox"/> 3035-3036 <input type="checkbox"/> 3037-3038 <input type="checkbox"/> 3039-3040 <input type="checkbox"/> 3041-3042 <input type="checkbox"/> 3043-3044 <input type="checkbox"/> 3045-3046 <input type="checkbox"/> 3047-3048 <input type="checkbox"/> 3049-3050 <input type="checkbox"/> 3051-3052 <input type="checkbox"/> 3053-3054 <input type="checkbox"/> 3055-3056 <input type="checkbox"/> 3057-3058 <input type="checkbox"/> 3059-3060 <input type="checkbox"/> 3061-3062 <input type="checkbox"/> 3063-3064 <input type="checkbox"/> 3065-3066 <input type="checkbox"/> 3067-3068 <input type="checkbox"/> 3069-3070 <input type="checkbox"/> 3071-3072 <input type="checkbox"/> 3073-3074 <input type="checkbox"/> 3075-3076 <input type="checkbox"/> 3077-3078 <input type="checkbox"/> 3079-3080 <input type="checkbox"/> 3081-3082 <input type="checkbox"/> 3083-3084 <input type="checkbox"/> 3085-3086 <input type="checkbox"/> 3087-3088 <input type="checkbox"/> 3089-3090 <input type="checkbox"/> 3091-3092 <input type="checkbox"/> 3093-3094 <input type="checkbox"/> 3095-3096 <input type="checkbox"/> 3097-3098 <input type="checkbox"/> 3099-3100 <input type="checkbox"/> 3101-3102 <input type="checkbox"/> 3103-3104 <input type="checkbox"/> 3105-3106 <input type="checkbox"/> 3107-3108 <input type="checkbox"/> 3109-3110 <input type="checkbox"/> 3111-3112 <input type="checkbox"/> 3113-3114 <input type="checkbox"/> 3115-3116 <input type="checkbox"/> 3117-3118 <input type="checkbox"/> 3119-3120 <input type="checkbox"/> 3121-3122 <input type="checkbox"/> 3123-3124 <input type="checkbox"/> 3125-3126 <input type="checkbox"/> 3127-3128 <input type="checkbox"/> 3129-3130 <input type="checkbox"/> 3131-3132 <input type="checkbox"/> 3133-3134 <input type="checkbox"/> 3135-3136 <input type="checkbox"/> 3137-3138 <input type="checkbox"/> 3139-3140 <input type="checkbox"/> 3141-3142 <input type="checkbox"/> 3143-3144 <input type="checkbox"/> 3145-3146 <input type="checkbox"/> 3147-3148 <input type="checkbox"/> 3149-3150 <input type="checkbox"/> 3151-3152 <input type="checkbox"/> 3153-3154 <input type="checkbox"/> 3155-3156 <input type="checkbox"/> 3157-3158 <input type="checkbox"/> 3159-3160 <input type="checkbox"/> 3161-3162 <input type="checkbox"/> 3163-3164 <input type="checkbox"/> 3165-3166 <input type="checkbox"/> 3167-3168 <input type="checkbox"/> 3169-3170 <input type="checkbox"/> 3171-3172 <input type="checkbox"/> 3173-3174 <input type="checkbox"/> 3175-3176 <input type="checkbox"/> 3177-3178 <input type="checkbox"/> 3179-3180 <input type="checkbox"/> 3181-3182 <input type="checkbox"/> 3183-3184 <input type="checkbox"/> 3185-3186 <input type="checkbox"/> 3187-3188 <input type="checkbox"/> 3189-3190 <input type="checkbox"/> 3191-3192 <input type="checkbox"/> 3193-3194 <input type="checkbox"/> 3195-3196 <input type="checkbox"/> 3197-3198 <input type="checkbox"/> 3199-3200 <input type="checkbox"/> 3201-3202 <input type="checkbox"/> 3203-3204 <input type="checkbox"/> 3205-3206 <input type="checkbox"/> 3207-3208 <input type="checkbox"/> 3209-3210 <input type="checkbox"/> 3211-3212 <input type="checkbox"/> 3213-3214 <input type="checkbox"/> 3215-3216 <input type="checkbox"/> 3217-3218 <input type="checkbox"/> 3219-3220 <input type="checkbox"/> 3221-3222 <input type="checkbox"/> 3223-3224 <input type="checkbox"/> 3225-3226 <input type="checkbox"/> 3227-3228 <input type="checkbox"/> 3229-3230 <input type="checkbox"/> 3231-3232 <input type="checkbox"/> 3233-3234 <input type="checkbox"/> 3235-3236 <input type="checkbox"/> 3237-3238 <input type="checkbox"/> 3239-3240 <input type="checkbox"/> 3241-3242 <input type="checkbox"/> 3243-3244 <input type="checkbox"/> 3245-3246 <input type="checkbox"/> 3247-3248 <input type="checkbox"/> 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type="checkbox"/> 3307-3308 <input type="checkbox"/> 3309-3310					

SECRET

STANDARD FORM 52 PREVIOUS EDITIONS BY THE U. S. GOVERNMENT PRINTING OFFICE WASHINGTON, D. C. 20540 GSA GEN. REG. NO. 27 (4-72)		UNVOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. DATE OF BIRTH <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <div style="text-align: center; padding: 5px;">Promotion</div>		4. DATE OF REQUEST <div style="text-align: center; padding: 5px;">5 Aug. 55</div>	
B. POSITION (Specify whether establish, change grade or title, etc.) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		5. EFFECTIVE DATE A. PROPOSED: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
6. APPROVED: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		7. C-9 OR OTHER LEGAL AUTHORITY <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
FROM: Ops Officer (PP) BFF-923-12 GS-0136.31-12 \$7200.00 P/A <div style="text-align: center; padding: 5px;">DDP/FE Branch 5</div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		TO: Ops Officer (PP) BFF-923-12 GS-0136.31-13 \$8990.00 P/A <div style="text-align: center; padding: 5px;">DDP/FE Branch 5</div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
8. POSITION TITLE AND SYMBOLS <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		9. SERVICE, GRADE, AND SALARY <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
10. ORGANIZATIONAL DESIGNATIONS <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		11. HEADQUARTERS <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
12. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		13. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL SD:DP	
14. REMARKS (Use reverse if necessary) <div style="padding: 10px;"> Pers. Data Sheet, Recommendation, Job Description and Fitness Report Attached. </div>			
15. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 1-17 <input checked="" type="checkbox"/> 10 <input type="checkbox"/> 10-17 <input type="checkbox"/> DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>		16. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> E.A. <input type="checkbox"/> REEL <input type="checkbox"/>	
17. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> W 18. RACE <input type="checkbox"/> M <input type="checkbox"/> W		19. APPROPRIATION FROM: 6-3715--55-012 TO: Same	
20. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <div style="text-align: center; padding: 5px;">Yes</div>		21. DATE OF APPOINTMENT AFFIDAVIT (ACCESSION ONLY) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
22. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:		23. STANDARD FORM 50 REMARKS <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
24. CLEARANCES A. <div style="border: 1px solid black; height: 20px; width: 100%;"></div> B. CEIL OR POS CONTROL <div style="border: 1px solid black; height: 20px; width: 100%;"></div> C. CLASSIFICATION <div style="border: 1px solid black; height: 20px; width: 100%;"></div> D. PLACEMENT OR EXPL. <div style="border: 1px solid black; height: 20px; width: 100%;"></div> E. <div style="border: 1px solid black; height: 20px; width: 100%;"></div> F. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		INITIAL OR SIGNATURE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
DATE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		REMARKS: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	

Approved SEP 13 1955

20 Sept 55

SECRET

DD/P

PERSONNEL DATA SHEET

NAME:

AGE:

DATE: 9 September 1955

AND DUTIES: Ops Officer

DD/P UNIT: FE

PRIMARY CAREER

DESIGNATION: PP

PRESENT GRADE: GS-12

PRESENT T/O SLOT BFF-923

PROPOSED GRADE: GS-13

NUMBER AND GRADE: GS-12/13

CIA TRAINING: Orientation 2-5 Oct 51

Basic Psychological Warfare Seminar - May 52

PROPOSED T/O SLOT BFF-923

Advanced " " " " - Nov 52

NUMBER AND GRADE: GS-12/13

EDUCATION: 1940 - 1943, A.B. Harvard U, History, Government, Economics

1943 - 1944, Yale, Far East Japanese, Certificate

January 1950, A.M., U of Pennsylvania, History

LANGUAGE PROFICIENCY: Japanese, German

ASSESSED:

DATE:

TYPE OF POSITION:

RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-OSS):

1943 - 1946, U.S. Army, Cpl, MIS Japanese language specialist

1946 - 1951, Ass't Professor of History, Eickenson College, Pennsylvania

SUMMARY OF CIA-SSU-OSS ASSIGNMENTS INCLUDING PREVIOUS GRADES AND DATES:

RECOMMENDED BY:

Chief, FE/5

CONCURRENCES:

RECOMMENDATION OF CAREER SERVICE BOARD:

Subject promoted GS-12,
26 April 1955

26 55 11 07 VII.22

OFFICE OF PERSONNEL

SECRET

SECRET

MEMORANDUM FOR: FE/Personnel

FROM : Chief, FE/5

SUBJECT : Promotion of []

1. [] holds the position of senior KUCAGE officer in the []

2. The position that [] occupies calls for a considerable degree of initiative, diplomacy and resourcefulness. [] has demonstrated that he possesses these qualities having displayed sound judgement in dealing with a service where many policy problems have to be met and solved. In addition, as will be noted from the attached recommendation from the field, []

3. Attached is a job description for [] which illustrates in more detail the special requirements necessary for the position which he has so ably filled since April 1st of 1964.

4. [] is recommended for promotion to GS-13.

[]
Chief, FE/5

SECRET

SECRET

REQUEST FOR PERSONNEL ACTION Information

UNVOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initials, and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
			17 Aug 53
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED: 20 Dec 53 D. APPROVED:	
B. POSITION (Specify whether establish, change grade or title, etc.)		7. C. S. OR OTHER LEGAL AUTHORITY	

FROM - Operations Officer (PW) BF-93 OS-132-12 \$7040.00 p/a DDP/FE Political & Psychological Warfare Political & Psychological Warfare Sect. Washington, D. C.	TO - Intelligence Officer (PW) II S-5-12 OS-12 \$7040.00 p/a DDP/FE Political & Psychological Warfare Washington, D. C.
10. POSITION TITLE AND NUMBER	11. HEADQUARTERS
12. FIELD OR DEPARTMENTAL	13. FIELD OR DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Slot #5 (OS-13 slot)

Transfer TO Unvouchered Funds FROM Vouchered Funds

14. REQUEST APPROVED Signature: [Signature] Title: PP/CS	
15. VETERAN PREFERENCE NONE [] WAR [] OTHER [] 5 PT. [] 10 POINT [] DISAB. [] OTHER []	
16. POSITION CLASSIFICATION ACTION NEW [] VICE [] I. A. [] REAL []	
17. APPROPRIATION FROM: 4-3700-20 TO: 4-3745-55-042	
18. SUBJECT TO C. S. RETIREMENT ACT (YES - NO)	
19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSION ONLY)	
20. LEGAL RESIDENCE [] CLAIMED [] PROVED STATE:	

21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.	07.		
E.			

F. APPROVED BY

SECRET

STANDARD FORM 52
PROPERTY OF THE
U. S. GOVERNMENT
REPRODUCTION PROHIBITED
GPO: 1950 O-570-000

REQUEST FOR PERSONNEL ACTION

SECRET

UNVOUCHERED

REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
			17 Aug 53
5. NATURE OF ACTION REQUESTED: A. FILL/STILL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. FUNDING (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

9. FROM Operations Officer (PW) 3P-93 GS-12-12 \$7040.00 p/a DDP/FE Political & Psychological Warfare Political & Psychological Warfare Sect. Washington, D. C.	10. POSITION TITLE AND NUMBER Intelligence Officer (P-5) S-5-12 GS-12 \$7040.00 p/a DDP/FE H-5-5	11. HEADQUARTERS
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Slot #5 (GS-13 slot)

Transfer TO Unvouchered Funds FROM Vouchered Funds

C#1074

B. REQUESTED BY (Name and title)		D. REQUEST APPROVED BY	
Personnel Officer (Name and telephone extension) Room 3457		Signature: Title:	
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NONE WAR OTHER S.P. 15 POINT DISAD. OTHER		NEW VICE I.A. REEL	
16. SEX	17. APPROPRIATION	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT OFFICIALS ONLY
M	FROM 1-3700-20 TO 1-3745-55-012		
20. STANDARD FORM 65 REMARKS		21. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CTR. OR POC CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY

SECRET

Security Information

~~SECRET~~
Security Information

PP Career Service Officer

1 Sept 1953

Chief, FE

Transfer of

1. Request for transfer of subject from the FE Division PP Staff T/O to the T/O of FE Branch 5 in order that he may be assigned as Senior PP Officer was made 17 August 1953. The Branch was notified that no action would be taken until indication was given regarding Subject's fulfillment of training requirements.

2. Subject has satisfied Phase I by virtue of his 2 years' experience. He will undertake to complete his training beginning 5 October 1953 on which date he has been enrolled in the Phase II Course.

GEORGE E. AURELL

FE-5/

Distribution:

- 2 - PP Career Serv. Officer
- 2 - FE/5

Note: Request for reassignment approval was received by PP/CSO on 24 August 1953. FE Division was notified of training requirements on 25 August 1953. This memorandum was received on 3 September and forwarded to FDC on 4 September 1953.

PP/CS

~~SECRET~~
Security Information

SECRET

SECURITY INFORMATION

STANDARD FORM 52

FORM 52-1 (Rev. 1-61)
U. S. CIVIL SERVICE COMMISSION
GENERAL REG. - PERSONNEL
BUREAU (UNITED STATES)

REQUEST FOR PERSONNEL ACTION

VOLUNTEERED FUNDS

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
Joseph B. SMITH			27 Mar 53
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
Promotion			
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <i>[Signature]</i>	

FROM— Operations Officer (PW) EF-93-11	TO— Operations Officer (PW) EF-93
GS-132-11 \$5940.00 p/a	GS-132-12 \$7040.00 p/a
DDP/FE	DDP/FE
Political & Psychological Warfare Staff	Political & Psychological Warfare Staff
Political & Psychological Warfare Section	Political & Psychological Warfare Section
Washington, D.C.	Washington, D.C.
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Position description is attached.

B. REQUESTED BY (Name and title)

Kathryn J. Rex, Personnel Officer

C. REQUEST APPROVED BY

Signature: *[Signature]*

6. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)

Mary Lee Mitchell 3587 - 2314

Title:

Personnel Officer

13. VETERAN PREFERENCE

NONE	WHEN	OTHER	1-PT.	12-POINT
				DEAD OTHER

14. POSITION CLASSIFICATION ACTION

NEW	VICE	I. A.	REAL

15. SEX

16. RACE

17. APPROPRIATION

FROM: 3700-20

TO: 3700-20

18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)

19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)

20. LEGAL RESIDENCE

☐ CLAIMED ☐ PROVED

STATE:

21. STANDARD FORM 50 REMARKS

22. CLEARANCES

INITIAL OR SIGNATURE

DATE

REMARKS:

A.

B.

C. CEIL OR POS. CONTROL

C. CLASSIFICATION

D. PLACEMENT OR ENPL

E.

F. APPROVED BY

Charles H. Powell

13 Apr 53

SECRET

10-4/23-9

~~CONFIDENTIAL~~

PERSONNEL ACTION REQUEST						REGISTER NO.	
NAME <div style="border: 1px solid black; width: 100px; height: 15px;"></div>				REQUESTED EFFECTIVE DATE 30 Mar.			
NATURE OF ACTION Promotion				WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE:			
FROM TITLE Intelligence Officer GRADE AND SALARY GS-9 \$5060.00 p/a OFFICE OPC DIVISION FE BRANCH AND SECTION Plans Branch Slot 521 OFFICIAL STATION Washington D. C. DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>				TO C/O Intelligence Officer CE-11 \$5940.00 p/a OPC FE Plans and Operations Br. Psychological Warfare Unit Washington, D. C. DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>			
REMARKS (Slot 521) JK <div style="text-align: right;"># 1389</div>							
RECOMMENDED: 14 February 1952 <div style="border: 1px solid black; width: 100px; height: 30px; float: right;"></div>							
FOR USE OF PERSONNEL ONLY							
PLACEMENT DATE QUALIFY <div style="border: 1px solid black; width: 100px; height: 20px;"></div> CLEARANCE APPROVED DATE TYPE DATE TYPE DATE SIGNATURE				TEACHINGS AND RECORDS ATTORNEY RESTRICTIONS C & S AUTHORITY CERT SIGNATURE 225-52 PERSONNEL RELATIONS CASE SIGNATURE SUBJECT TO SECURITY CLEARANCE SIGNATURE OF EXECUTIVE			
CLASSIFICATION RELEASE NO. 7891 FORM 1004 DATE 3/13/52				DATE APPLIED FOR 8-52 APPROVALS DATE			

FORM NO. 37-3
REV. 12-30

CONFIDENTIAL

PERSONNEL ACTION REQUEST				REGISTER NO.													
NAME <div style="border: 1px solid black; height: 15px; width: 100%;"></div>			REQUESTED EFFECTIVE DATE <i>17 Sept 51</i>														
NATURE OF ACTION <i>Encroachment</i> Appointment			WHEN LEAVING (VOUCHER IN)														
FROM			TO														
TITLE <i>Intelligence Officer</i>																	
GRADE AND SALARY <i>GS-9, \$4600 p/a</i>																	
OFFICE <i>S.C. 29 Aug 51</i>			OPC														
DIVISION			FE														
BRANCH AND SECTION			Plans Branch														
OFFICIAL STATION <i>Washington, D. C.</i>																	
DEPARTMENTAL <input type="checkbox"/> FIELD <input type="checkbox"/>			DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>														
REMARKS <i>C # 1314</i> <i>132</i> <i>8-9-51 71302</i> <i># 8003</i>																	
RECOMMENDED <i>12 June 1951</i> <small>(DATE)</small>			<div style="border: 1px solid black; height: 30px; width: 100%;"></div> <i>Chief FE Division</i> <small>(NAME AND TITLE OF APPROVING OFFICIAL)</small>														
FOR USE OF PERSONNEL ONLY																	
PLACEMENT DATE QUALIFICATION <i>6/26/51</i>			TRANSACTIONS AND RECORDS APPROPRIATION: <i>2125700</i> ALLOTMENT: <i>2017</i> C. S. C. AUTHORITY:														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">CLEARANCE REQUESTED</td> <td colspan="2">CLEARANCE APPROVED</td> </tr> <tr> <td>DATE</td> <td>TYPE</td> <td>DATE</td> <td>TYPE</td> </tr> <tr> <td colspan="2">SIGNATURE</td> <td colspan="2"></td> </tr> </table>			CLEARANCE REQUESTED		CLEARANCE APPROVED		DATE	TYPE	DATE	TYPE	SIGNATURE				<div style="border: 1px solid black; height: 150px; width: 100%;"></div>		
CLEARANCE REQUESTED		CLEARANCE APPROVED															
DATE	TYPE	DATE	TYPE														
SIGNATURE																	
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CLASSIFICATION		DATE APPROVED															
BUREAU NO.	C. S. C. NO.	DATE	REAL														
<i>2974</i>	<i>3051</i>	<i>6/21/51</i>	<input checked="" type="checkbox"/>														
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<i>6/26/51</i>																	
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DATE	SIGNATURE																
<i>JUN 22 1951</i>																	

REPORT OF TRAVEL

1950

Position Considered for: I.O. Office: FE-3 Interviewer:

Dignified.....	Natural.....	Awkward....
Tell-tale.....	Clean.....	Slovenly....
Wide-Awake....	Stolid.....	Apathetic..
Expressive....	Ordinary....	Insignificant

Persuasive.....	Responsive..	<input checked="" type="checkbox"/>	Fastidious....
Importurbable..	Steady.....	<input checked="" type="checkbox"/>	Unctuable....
Cheerful.....	Tyrannical...		Defected.....
Straight-forward	<input checked="" type="checkbox"/>	Reserved.....	Evasive.....
Modest.....	<input checked="" type="checkbox"/>	Complacent..	Conceited....
Dominant.....	Confident...	<input checked="" type="checkbox"/>	Subsistive...

Area Knowledge Extensive Studies of Japan-Korea Area but no travel in

Previous intelligence or related experience MIS Language School

General Recommendations

- 1.
- 2.

Specific Recommendation for employment:

Position: _____ Branch: _____ Division: _____

Location: _____

Salary level: _____

Recommendation as to potential of candidate to the organization in
other than the position presently under consideration

(Enter any additional remarks)

CONFIDENTIAL

CONFIDENTIAL

REPORT OF INTERVIEW

11/28/1958

Name of Candidate

Position Considered for _____ Office _____

Interviewer

Personal Appearance

Dignified.....	Natural..... <input checked="" type="checkbox"/>	Awkward....
Well-groomed..	Clean..... <input checked="" type="checkbox"/>	Slovenly...
Wide-Awake.... <input checked="" type="checkbox"/>	Stolid.....	Apathetic..
Impressive....	Ordinary....	Insignificant

Personality

Persuasive....	Responsive..	Traiturn...
Imperturbable..	Steady.....	Excitable...
Cheerful.....	Troubled...	Defected....
Straight-forward	Reserved...	Impulsive....
Humble.....	Complacent..	Conceited...
Dominant.....	Confident...	Submissive..

Is education adequate? Yes (☒) No () Is language facility adequate? Yes (☒) No ()

Area Knowledge Study For East

Previous intelligence or related experience Tajima Long School

Salary level requested \$65.4 Lowest salary acceptable \$5000.00

General Recommendation:

1. Candidate is not recommended for employment. Remarks: _____

2.

Specific Recommendation for employment:

Position: _____ Branch _____ Division _____

Location: _____

Salary level: _____

Recommendation as to potential value of candidate to the organization in other than the position immediately under consideration: _____

(Enter any additional remarks or comments here.)

SW
Signature of Interviewer

CONFIDENTIAL

Let - brief visit to D.

off - out at the time due to being mistaken
due to of an - correct, looking
about page of site family of people

Available and Lpt 51

MILITARY STATUS QUESTIONNAIRE

THIS DATE

NAME (PRINT)		BIRTH DATE (MM/DD/YY)	
SEX	RACE	COLOR	MARITAL STATUS
<input checked="" type="checkbox"/> MALE	<input checked="" type="checkbox"/> WHITE	<input checked="" type="checkbox"/> WHITE	(1) SINGLE <input checked="" type="checkbox"/> (2) MARRIED <input checked="" type="checkbox"/> (3) WIDOWED <input type="checkbox"/> (4) DIVORCED <input type="checkbox"/> (5) SEPARATED <input type="checkbox"/>
NO. OF DEPENDENTS	AGENCY ASSIGNMENT		
(INCLUDE WIFE)	OFFICE	DIVISION	CODE
2	POSITION OR TITLE	GRADE	CODE

PRESENT DRAFT STATUS

(1) HAVE YOU REGISTERED FOR DRAFT? (2) YES ☐ (3) NO ☒

(4) IF YES, CHECK YOUR PRESENT DRAFT CLASSIFICATION BELOW

- | | |
|--|--|
| <input type="checkbox"/> 1A AVAILABLE FOR MILITARY SERVICE. AGES 20-26 | <input type="checkbox"/> 4B OFFICIAL DEFERRED BY LAW. |
| <input type="checkbox"/> 1AO CONSCIENTIOUS OBJECTOR, BUT AVAILABLE FOR NON-COMBATANT DUTY. | <input type="checkbox"/> 4C ALIEN. |
| <input type="checkbox"/> 1C MEMBER OF ANY ACTIVE BRANCH OF MILITARY SERVICE. MUST BE ON FULL DUTY. | <input type="checkbox"/> 4D MINISTER OF RELIGION OR DIVINITY STUDENT. |
| <input type="checkbox"/> 1D MEMBER OF ANY RESERVE COMPONENT OF MILITARY SERVICE. CANNOT BE CALLED BY DRAFT BOARDS. CALLED ONLY BY MILITARY SERVICE CONCERNED. | <input type="checkbox"/> 4E CONSCIENTIOUS OBJECTOR - OPPOSED TO BOTH COMBATANT AND NON-COMBATANT SERVICE. |
| <input type="checkbox"/> 2A DEFERRED ON ACCOUNT OF OCCUPATION. | <input type="checkbox"/> 4F PHYSICALLY OR OTHERWISE UNFIT FOR SERVICE. |
| <input type="checkbox"/> 2C DEFERRED FOR AGRICULTURAL OCCUPATION. | <input type="checkbox"/> 4G MAN WHO HAS ATTAINED TWENTY-SIXTH BIRTHDAY. NOT LIABLE TO INDUCTION UNDER PRESENT ACT. |
| <input type="checkbox"/> 3A MAN HAS DEPENDENTS. | |
| <input type="checkbox"/> 4A REGISTRANT WHO HAS COMPLETED SUFFICIENT SERVICE IN WORLD WAR II TO BE CLASSIFIED AS A VETERAN (NINETY DAYS SERVICE DURING FIGHTING WAR OR ONE YEAR AFTER V-J DAY). SOLE SURVIVING SON IN FAMILY. IF A FAMILY HAD TWO SONS IN A WAR AND ONE WAS KILLED, THE SOLE SURVIVING SON COME IN THIS CATEGORY. | |

LOCAL DRAFT BOARD	
NAME	NO.
ADDRESS (Street and No.)	

The remainder of this form will be filled out only by personnel who have performed duty in any of the U.S. Armed Services, Merchant Marine or any foreign military organization.

SERVICE RECORD

1. CHECK ORGANIZATIONS IN WHICH YOU HAVE SERVED

- | | | |
|--|--|--|
| (1) ARMY <input checked="" type="checkbox"/> | (4) AIR FORCE <input type="checkbox"/> | (7) NATIONAL GUARD <input type="checkbox"/> |
| (2) NAVY <input type="checkbox"/> | (5) COAST GUARD <input type="checkbox"/> | (8) FOREIGN MILITARY ORGANIZATION <input type="checkbox"/> |
| (3) MARINE CORPS <input type="checkbox"/> | (6) MERCHANT MARINE <input type="checkbox"/> | |

2. LENGTH OF ACTIVE DUTY IN THE U.S. ARMED SERVICES (INCLUDING TRAINING TOURS)

	YEARS	MONTHS
(1) WORLD WAR I AND ALL PRIOR DUTY	_____	_____
(2) BETWEEN WORLD WAR I AND WORLD WAR II	_____	_____
(3) WORLD WAR II	2	11
(4) SINCE WORLD WAR II	_____	_____
ACTIVE DUTY TO DATE (TOTAL)	2	11

3. FURNISH THE FOLLOWING DATA AS TO YOUR COMMISSIONED OR ENLISTMENT STATUS UPON SEPARATION:

(1) COMMISSIONED ☐ OR (2) ENLISTED ☒

NAME OF SERVICE	RANK, GRADE OR RATING	ARM, BRANCH OR CORPS	LAST SERIAL, SERVICE OR FILE NO.
ARMY	T/5 grade	HTS	11 061 132

DO NOT WRITE IN SPACES BELOW

4. CHECK TYPE OF DEPARTURE:

- (1) ☐ RETIREMENT FOR AGE
 (2) ☐ RETIREMENT FOR SERVICE
 (3) ☐ RETIREMENT FOR COMBAT DISABILITY
 (4) ☐ RETIREMENT FOR OTHER PHYSICAL DISABILITY
 (5) ☒ SEPARATED (POINTS, CATEGORY, ETC.) **length of service category**
 (6) ☐ RELEASE ESSENTIAL TO NATIONAL HEALTH, SAFETY OR INTEREST
 (7) ☐ RELEASE BECAUSE OF UNDUO HARDSHIPS

5. IF YOUR PRESENT STATUS DIFFERS IN ANY RESPECT FROM THAT STATED IN 3 ABOVE, INDICATE CHANGE ONLY AND DATE OF CHANGE:

	DATE	CODES
COMMISSIONED _____	_____	_____
SERVICE _____	_____	_____
ARM, BRANCH OR CORPS _____	_____	_____
RANK, GRADE OR RATING _____	_____	_____
SERVICE, SERIAL OR FILE NO. _____	_____	_____

6. ARE YOU NOW IN THE NATIONAL GUARD? (1) YES ☐ (2) NO ☒

(A) IF YES, WHAT UNIT? _____

(B) DID YOU ENTER FEDERAL ARMED FORCES THROUGH NATIONAL GUARD? (1) YES ☐ (2) NO ☒

7. DO YOU HAVE RESERVE STATUS? (1) YES-INACTIVE ☐ (2) YES-ACTIVE ☐ (3) NO ☒

(A) ARE YOU ASSIGNED TO AN AGENCY UNIT? (1) YES ☐ (2) NO ☒

(B) IF NO, WHAT IS YOUR ASSIGNMENT? **none**

(C) IS YOUR ASSIGNMENT AN ORGANIZED UNIT? (1) YES ☐ (2) NO ☒

8. DO YOU HAVE A MOBILIZATION ASSIGNMENT? (1) YES ☐ (2) NO ☒

(A) IF YES, STATE NAME OF UNIT ORGANIZATION _____

REMARKS:

Frank B. Smith
 SIGNATURE

SECRET

REPRODUCTION MASTERS

SECRET

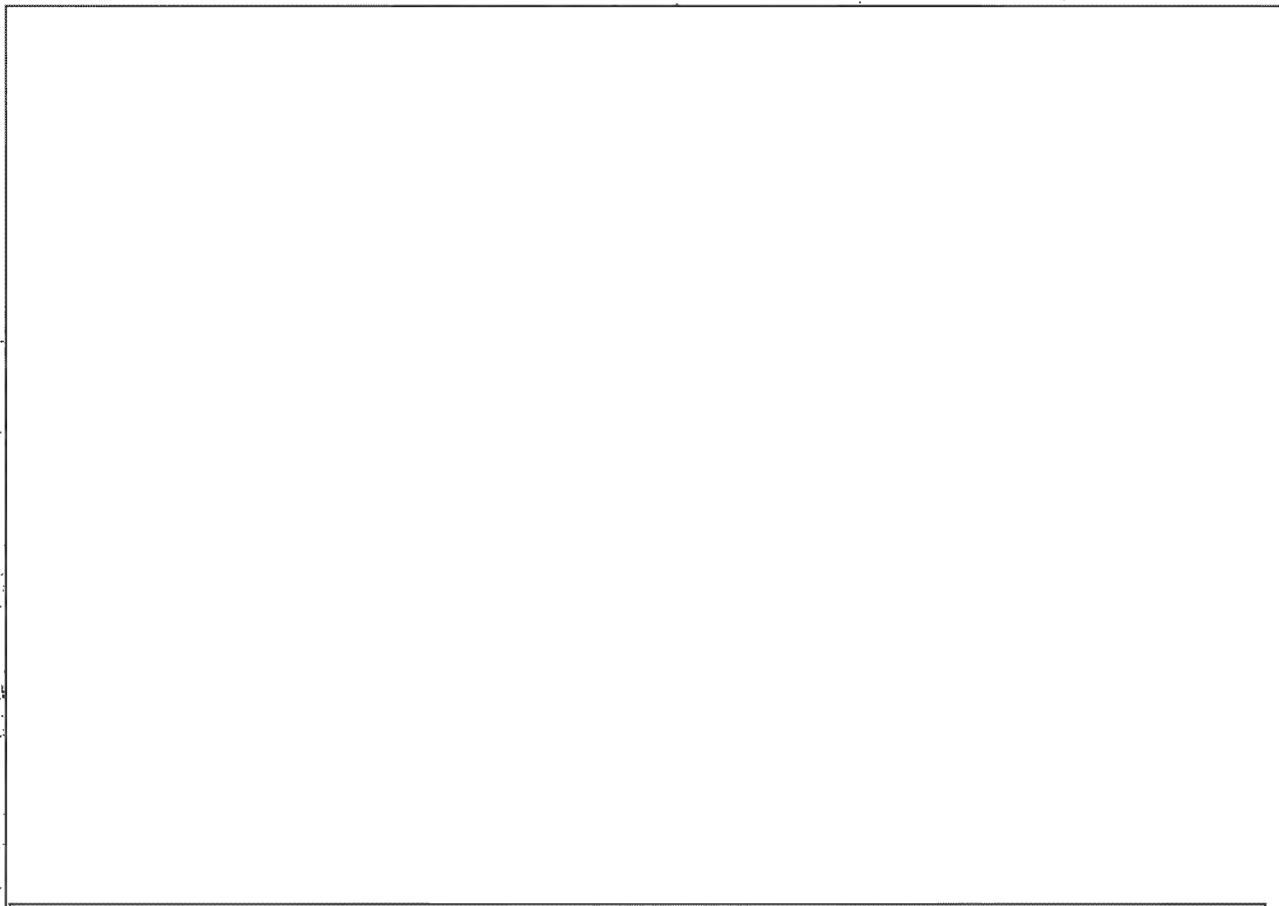
GROUP 1

BIOGRAPHIC PROFILE

SECRET

H a n d l e W i t h C a r e





File No. K-1480
21 July 1960

SECRET

MEMORANDUM FOR: Chief, Records and Services Division
Office of Personnel

SUBJECT : 



cc: SSD/OS

THIS MEMO MUST REMAIN
ON TOP OF FILE

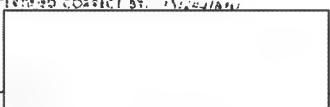
Form 1-60 1580a

2002 3 30 01:00

(10-12-60)

57

RECORD OF LEAVE DATA

1. NAME (Mr., Mrs., Miss)		2. SOCIAL SECURITY NO.		3. (FOR AGENCY USE)																																																																									
4. DATE AND NATURE OF SEPARATION				5. A. SUBJECT TO 5 USC ANNOT. 115 day leave ceiling? <input type="checkbox"/> YES <input type="checkbox"/> NO																																																																									
RETIREMENT 063073				B. (LAST DATE SUBJECT TO 5 USC 6304B)																																																																									
6. TOTAL SERVICE FOR LEAVE (as of date of separation)				C. ANNUAL LEAVE BALANCE AS OF THAT DATE (hours)																																																																									
<input type="checkbox"/> Less than 15 years (hours) _____ years _____ months _____ days				<input type="checkbox"/> 15 years or more																																																																									
SUMMARY OF ANNUAL AND SICK LEAVE				SUMMARY OF HOME LEAVE (15.13)																																																																									
7. Carryover balance from prior leave year ending: MO. DAY YEAR ANNUAL SICK 01 00 73 360 2019				18. Basic service period of 24 months of continuous service abroad: DATE STARTED MO. DAY YEAR DATE COMPLETED MO. DAY YEAR																																																																									
8. Current leave year accrual through pay period ending: MO. DAY YEAR ANNUAL SICK 09 00 04				19. Current 12 months accrual period began on: MO. DAY YEAR Hours absence without pay since that date: _____																																																																									
9. Total: 450 2067				20. Current balance on accrual as of: MO. DAY YEAR No. days: 64																																																																									
10. Reduction in credits, if any (current year): 0 0				21. Twelve months accrual rate as of date of separation: No. days: 15																																																																									
11. Total leave taken, current year through date of separation: 0 0				22. Dates leave used, prior 24 months:																																																																									
12. Balance: 450 2067				<table border="1"> <thead> <tr> <th colspan="3">FROM</th> <th colspan="3">TO</th> </tr> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		FROM			TO			MO.	DAY	YEAR	MO.	DAY	YEAR																																																												
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MO.	DAY	YEAR	MO.	DAY	YEAR																																																																								
13. Total hours paid in lump sum: 0				23. DATES LEAVE USED, PRIOR 24 MONTHS:																																																																									
14. Salary rate(s) per hour: \$13.69				<table border="1"> <thead> <tr> <th colspan="3">FROM</th> <th colspan="3">TO</th> </tr> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		FROM			TO			MO.	DAY	YEAR	MO.	DAY	YEAR																																																												
FROM			TO																																																																										
MO.	DAY	YEAR	MO.	DAY	YEAR																																																																								
15. Lump sum leave dates (if part-time leave, explain in remarks):				24. DURING CURRENT CALENDAR YEAR																																																																									
From: 03 00 00 To: 03 00 00				A. Regular - active duty or training																																																																									
B. Special - civil disobedience				FROM TO MO. DAY YEAR MO. DAY YEAR																																																																									
16. DURING LEAVE YEAR IN WHICH SEPARATED: 0				FROM TO MO. DAY YEAR MO. DAY YEAR																																																																									
17. DURING STEP INCREASE WAITING PERIOD WHICH BEGAN ON: 12 10 72 0				FROM TO MO. DAY YEAR MO. DAY YEAR																																																																									
25. REMARKS (Include shore leave information, if applicable):																																																																													
SCD: 10/03/48																																																																													
26. CERTIFIED CORRECT BY: (Signature)		27. TITLE AGENCY - ADDRESS TELEPHONE NO.		28. DATE																																																																									
		FOR CHIEF PAYROLL		01/09/79																																																																									

LML: 03 JUL 73

SECRET
(When Filled In)

OEF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST, MIDDLE)	
3. NATURE OF PERSONNEL ACTION CONVERSION FROM RETIREMENT (VOLUNTARY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM AND CANCELLATION OF NSCA			
4. EFFECTIVE DATE MO. 06 YR. 73 06 30 73		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS CF TO V <input checked="" type="checkbox"/> CF TO CF <input checked="" type="checkbox"/>		7. Financial Analysis No. Chargeable 3135 0990 0000	
9. ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION FOREIGN FIELD		8. CSC OR OTHER LEGAL AUTHORITY P L 88-643 SECT 233	
10. LOCATION OF OFFICIAL STATION			

11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0340	13. GRADE AND STEP 14 8
14. CLASSIFICATION SCHEDULE (GS, 18, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	

16. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING ALPHABETIC	22. STATION CODE	23. INTEGRITY CODE	24. HONOR CODE	25. DATE OF BIRTH
26. LTR RAPIDS MO DA YR	27. SPECIAL REFERENCE	28. RETIREMENT DATA COCA	29. SEPARATION DATA CODE 08J00000	30. CORRECTION TYPE	31. NO DA YR	
32. VET PREFERENCE	33. SERV. COMP. DATE	34. VETERAN COMP. DATE	35. CAREER CATEGORY	36. TECH/HEALTH	37. NO DA YR	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YRS) 3-BREAK IN SERVICE (MORE THAN 3 YRS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED 1-YES 2-NO	

SIGNATURE OR OTHER AUTHENTICATION

POSTED

FORM 1130
5-68 11 71 Use Previous Ed. Form

SECRET

BBG

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUND	GR-STEP	NEW SALARY
		51	620	CF GS 14 8	\$28,478

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUND		5. LWOP HOURS	
				51 620		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADI
GS 14	7	\$26,954	12/14/69	GS 14	8	\$27,084	12/13/72		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
				10-13-72					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS				AUDITED BY					
11111111111111111111				11/35					
PCSIA 500 E Use previous editions PAY CHANGE NOTIFICATION WAF 554 (1-51)									

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DCS 10/14/72

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

3. NATURE OF PERSONNEL ACTION

CHANGE IN N.S.C.A.

4. EFFECTIVE DATE

MO. DA. YR.
02 2 72

5. CATEGORY OF EMPLOYMENT

6. FUNDS

V TO V

V TO O

O TO V

X O TO O

7. FINANCIAL ANALYSIS NO. (CHARGEABLE)

3135 0940 0002

8. CCK OR OTHER LEGAL AUTHORITY

9. ORGANIZATIONAL DESIGNATIONS

DDP/WH DIVISION

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

OPS OFFICER

12. POSITION NUMBER

0340

13. CAREER SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, 18, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

15

17. SALARY OR RATE

18. REMARKS

SIGNATURE OF OTHER AUTHENTICATION

FORWARDED

web 10-26-72

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND
EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE
CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
		91	620	CF GS 14 7	\$26,392

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND
EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE
CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
		91	520	CF GS 14 7	\$26,979

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME

[Redacted Name]

SERIAL ORGN. FUNDS GR-STEP

[Redacted Serial]

51 620 CF GS 14 7

NEW SALARY

\$23,573

651

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
						31 620 CF			
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION		9. EFFECTIVE DATE		10. ADJ.	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 14	6	\$21,621	12/17/67	GS 14	7	\$22,239	12/13/69		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
[Redacted Signature]						9-2-1-1969			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CUSTAS INITIALS						APPROVED BY			
[Redacted Initials]						[Redacted Signature]			
PCH 4 7-58 550.E Use previous editions PAY CHANGE NOTIFICATION (4-51)									

2500

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 9 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME

SERIAL ORGN. FUNDS GR-STEP

NEW
SALARY

51 620 OF GS 14 6

\$21,621

MAY 69

SECRET
(When Filled In)

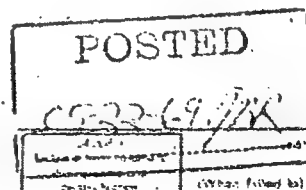
NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)	
3. NATURE OF PERSONNEL ACTION			
4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
MO DA YR 05 21 69		REGULAR	
6. FUNDS		7. Financial Analysis No. Chargeable	
V TO V CF TO V X		V TO CF CF TO CF	
9135 0990 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/WH FOREIGN FIELD BRANCH 1			
11. POSITION TITLE		12. POSITION NUMBER	
OPS OFFICER		0340	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES	
GS		0136.01	
16. GRADE AND STEP		17. SALARY OR RATE	
04 7 14 6		17289 19771	
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
35	10	51620 WH	45075 S
23. PAY CODE	24. DATE OF BIRTH	25. DATE OF GRADE	26. DATE OF TEL
3			
27. DATE OF BIRTH	28. DATE OF GRADE	29. DATE OF TEL	30. SECURITY REG. NO.
31. SPECIAL REFERENCE	32. RETIREMENT DATA	33. SEPARATION DATA CODE	34. SECURITY REG. NO.
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY
39. PREVIOUS CIVILIAN GOVERNMENT SERVICE	40. LEAVE CAT CODE	41. FEDERAL TAX DATA	42. STATE TAX DATA
SIGNATURE OR OTHER AUTHENTICATION			

FORM 1150
Rev 10-67Use Previous
Edition

SECRET

PLW



(When Filled In)

16 MAY 69

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DOF

SERIAL NUMBER NAME (LAST FIRST-MIDDLE)

NATURE OF PERSONNEL ACTION

REASSIGNMENT AND TRANSFER TO
CONFIDENTIAL FUNDS

4. EFFECTIVE DATE

05 18 69

5. CATEGORY OF EMPLOYMENT

REGULAR

FUND

V TO V

X

V TO CF

CF TO V

CF TO CF

7. Financial Analysis No. Chargeable

9135 0930 0000

8. CSC OR OTHER LEGAL AUTHORITY

50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS

DDP/WH
FOREIGN FIELD
BRANCH 1

10. LOCATION OF OFFICIAL STATION

12. POSITION NUMBER

0340

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

14 6

17. SALARY OR RATE

19771

18. REMARKS

HOME BASE: WH

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATION CODE	23. PAYGRADE CODE	24. PAYSCALE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
20	10	51620 WH	45075	3				
28. SITE EXPENSE	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION - Correction Code	33. SECURITY FILE NO.	34. SEP		
					100 DATA			
35. PAY PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. REGU / PENSION INSURANCE	40. SOCIAL SECURITY NO.			
PREVIOUS GOVERNMENT SERVICE			41. LEAVE CAT CODE	FEDERAL TAX DATA		STATE TAX DATA		
1. NO PREVIOUS SERVICE 2. NO LEAVE IN SERVICE 3. LEAVE IN SERVICE LESS THAN 1 YEAR 4. LEAVE IN SERVICE MORE THAN 1 YEAR				1. YES 2. NO		1. YES 2. NO		

SIGNATURE AND OTHER AUTHENTICATION

POSTED

05-16-69 1182

FORM 1130
MAY 1968

Use Previous Edition

SECRET

PLW

DO NOT WRITE IN THESE SPACES
EXCEPT FOR CORRECTIONS
AND ADDITIONS

FVD: 16 JUL 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						07 14 68		REGULAR			
6. FUNDS		7. TO V		8. TO CP		9. Financial Analysis No. Chargeable		10. CYC OR OTHER LEGAL AUTHORITY			
X						9235 0620 0000		50 USC 403 J			
11. ORGANIZATIONAL DESIGNATIONS						12. LOCATION OF OFFICIAL STATION					
DDP/WH						WASH., D.C.					
13. POSITION TITLE						14. POSITION NUMBER		15. SERVICE DESIGNATION			
OPS OFFICER						0645		D			
16. CLASSIFICATION SCHEDULE (RIS (R, N, I))				17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OR RATE			
GS				0136.01		14 6		19771			
20. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE		22. EMPLOY CODE		23. OFFICE CODING		24. STATION CODE		25. INTEGRITY CODE		26. PAYMENT CODE	
37		10		51150 WH		75013		1			
27. DATE OF BIRTH		28. DATE OF GRADE		29. DATE OF LST		30. SPECIAL REFERENCE		31. RESIGNMENT DATA		32. SEPARATION DATA CODE	
										33. SECURITY RTO NO	
34. VET. PREFERENCE		35. SERV. COMP. DATE		36. LONG. COMP. DATE		37. CAREER CATEGORY		38. FEEDBACK/REASON FOR CHANGE		39. SOCIAL SECURITY NO	
1. NONE		2. 10% INC.		3. 15% INC.		4. 20% INC.		5. 25% INC.		6. 30% INC.	
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE		41. LEAVE CATE CODE		42. FEDERAL TAX DATA		43. STATE TAX DATA		44. FEDERAL TAX DATA		45. STATE TAX DATA	
CODE		CODE		CODE		CODE		CODE		CODE	
1. NO PREVIOUS SERVICE		1. NO LEAVE		1. NO TAX EXEMPTIONS		1. NO TAX EXEMPTIONS		1. NO TAX EXEMPTIONS		1. NO TAX EXEMPTIONS	
2. NO LEAVE IN SERVICE		2. NO LEAVE IN SERVICE		2. NO TAX EXEMPTIONS		2. NO TAX EXEMPTIONS		2. NO TAX EXEMPTIONS		2. NO TAX EXEMPTIONS	
3. LEAVE IN SERVICE (MORE THAN 1 YEAR)		3. LEAVE IN SERVICE (MORE THAN 1 YEAR)		3. NO TAX EXEMPTIONS		3. NO TAX EXEMPTIONS		3. NO TAX EXEMPTIONS		3. NO TAX EXEMPTIONS	
SIGNATURE OF OTHER AUTHORIZATION											
FROM: OTR											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED <i>[Signature]</i> </div>											

FORM 1150
5-68Use Previous
Editions

SECRET

FVD

(When Filled In)

(When Filled In)

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1969

NAME	SERIAL	ORGN.	FUNCS	GR-STEP	OLD SALARY	NEW SALARY
		51	130	V GS 14 6	\$19,481	\$19,771

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. EMP NO/VIS	
				17 600		V			
6. OLD SALARY RATE									
Grade		Step		Salary		Last Eff. Date		7. NEW SALARY RATE	
								Grade Step Salary	
GS 14		5		417.198		12/19/65		GS 14 6 417.721	
								EFFECTIVE DATE	
								12/17/67	
8. TIME ACTION									
S. ADJ.									
C. ADJ.									
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCY									
SIGNATURE								DATE	
								130 APR 1967	
<input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS		[Signature] [Stamp: RECEIVED] [Stamp: APR 1967]							
FORM 7-66 560 E		U.S. GOVERNMENT PRINTING OFFICE PAY CHANGE NOTIFICATION							

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206,
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
		17	600	V	GS 14 5	\$17,198 \$17,953

MRT: 17 OCT 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DAF

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	
EXCEPTED APPOINTMENT CAREER		10 09 66	
5. CATEGORY OF EMPLOYMENT		REGULAR	
6. FUNDS		7. COST CENTER NO. CHARGEABLE	
X		7275 3000 0000	
8. CXC OR OTHER LEGAL AUTHORITY		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDS/OTR OPERATIONS SCHOOL HEADQUARTERS TRAINING BRANCH OPERATIONS FACULTY		WASH., D.C.	
11. POSITION TITLE		12. POSITION NUMBER	
INSTR OPERATIONS		1314	
13. SERVICE DESIGNATION		D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES	
GS		1712.32	
16. GRADE AND STEP		17. SALARY OR RATE	
14 5		17198	
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
13	10	17600 OTR	75012
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF LEL	26. DATE OF LEL
12 23 62	12 23 62	12 19 65	12 19 65
27. NID REPIRES	28. SPECIAL REFERENCE	29. SEPARATION DATA CODE	30. CORRECTION/CANCELLATION DATA
NO SA	NO	2	NO
31. YET, PREFERENCE	32. SERV COMP DATE	33. LEAVE CAT	34. FEDERAL TAX DATA
1	10 03 68	17151	1
35. SOCIAL SECURITY NO	36. SOCIAL SECURITY NO	37. SOCIAL SECURITY NO	38. SOCIAL SECURITY NO
00000	00000	00000	00000
SIGNATURE OF OTHER AUTHENTICATING			
POSTED			

FORM 1159
(1-67)

Use Previous Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

NRT: 17 OCT 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

006

1. SERIAL NUMBER		2. NAME	
[REDACTED]		[REDACTED]	
3. NATURE OF PERSONNEL ACTION			
RESIGNATION			
4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
10 08 1966		REGULAR	
6. COST CENTER NO. CHARGEABLE		7. USE OF OTHER LEGAL AUTHORITY	
7135 0633 0000			
8. ORGANIZATIONAL DESIGNATIONS			
DDP/WH FOREIGN FIELD BRANCH 4			
9. LOCATION OF OFFICIAL STATION			
[REDACTED]			
10. POSITION TITLE			
OPS OFFICER			
11. CLASSIFICATION SCHEDULE (GS, LB, etc.)		12. OCCUPATIONAL SERIES	
GS		0136.01	
13. GRADE AND STEP		14. SALARY GR. RATE	
14 5		17123	
15. REMARKS			
[REDACTED]			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODES		22. STATION CODE		23. INTEREST CODE		24. REG. CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
W5		10		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
28. HPE EXPIRES		29. SPECIAL REFERENCE		30. RESIDENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/ANNULLATION DATA		33. SECURITY		34. SSI					
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]					
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LEAVE COMP. DATE		38. CAREER CATEGORY		39. HEALTH / WELFARE INSURANCE		40. SOCIAL SECURITY NO.							
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT				43. FEDERAL TAX DATA				44. STATE TAX DATA					
[REDACTED]				[REDACTED]				[REDACTED]				[REDACTED]					

SIGNATURE OR OTHER AUTHENTICATION

1122

Use Previous Edition

SECRET


[Handwritten Signature]

1. This form is to be filled out by the personnel action authority.
2. It is to be filled out for all personnel actions.
3. It is to be filled out for all personnel actions.

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966



SERIAL	OPGN.	FUND	GR-STEP	OLD SALARY	NEW SALARY
	51	720	OF GS 14 5	\$16,712	\$17,198

SECRET
(When Filled In)

OCS 09/31/66		NOTIFICATION OF PERSONNEL ACTION					
1. SERIAL NUMBER <div style="border: 1px solid black; height: 15px; width: 100%;"></div>	2. NAME (LAST, FIRST, MIDDLE) <div style="border: 1px solid black; height: 15px; width: 100%;"></div>						
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE MO DA YR 05 23 66	5. CATEGORY OF EMPLOYMENT				
6. FUNDS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">V TO V</td> <td style="width: 25%; text-align: center;">V TO CF</td> </tr> <tr> <td style="text-align: center;">CF TO V</td> <td style="text-align: center;">X CF TO CF</td> </tr> </table>		V TO V	V TO CF	CF TO V	X CF TO CF	7. COST CENTER NO. CHARGEABLE 6135 0633 0000	8. CSC OR OTHER LEGAL AUTHORITY
V TO V	V TO CF						
CF TO V	X CF TO CF						
9. ORGANIZATIONAL DESIGNATIONS DDP&WH DIVISION BR 4 <div style="border: 1px solid black; display: inline-block; width: 150px; height: 15px; vertical-align: middle;"></div>		10. LOCATION OF OFFICIAL STATION <div style="border: 1px solid black; display: inline-block; width: 150px; height: 15px; vertical-align: middle;"></div>					
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0084	13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15. OCCUPATIONAL SERIES 0136, 01	16. GRADE AND STEP 14	17. SALARY OR RATE				
18. REMARKS <div style="text-align: right; margin-top: 50px;"><div style="border: 1px solid black; padding: 5px; display: inline-block;">[Stamp]</div><div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px; margin-top: 5px;"></div></div>							
SIGNATURE OF OTHER AUTHENTICATION							

Form 1-63 1150a ASD 6-64

Use Previous Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(0-1)

(When Filled In)

SECRET
(When Filled In)

11 MAR 66

NOTIFICATION OF PERSONNEL ACTION

005

1. SERIAL NUMBER

2. NAME (LAST, FIRST, MIDDLE)

3. NATURE OF PERSONNEL ACTION

DESIGNATION AS PARTICIPANT IN CIA
RETIREMENT AND DISABILITY SYSTEM

4. EFFECTIVE DATE

NO. DA. YR.
03 13 66

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO CF

CF TO V

X

CF TO CF

7. COST CENTER NO. CHARGEABLE

6135 0633 0000

8. CSC OR OTHER LEGAL AUTHORITY

PL 88-643 SECT. 203

9. ORGANIZATIONAL DESIGNATIONS

DDP/WH
FOREIGN FIELD
UNASSIGNED

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

OPS OFFICER

12. POSITION NUMBER

0000

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LR, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

14 5

17. SALARY OR RATE

16712

18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL
OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL
INTELLIGENCE.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMBER ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. EMPLOY CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
25	10	51620 W	0404		3		12 23 62	12 19 65
28. NTE EXPIRES NO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE NO. DA. YR.	33. SECURITY RLO NO.		34. SEX	
		2			EOD DATA			
35. VET. PREFERENCE CODE 0 - NONE 1 - 50% 2 - 100%	36. SERV. COMP. DATE NO. DA. YR.	37. LONG COMP. DATE NO. DA. YR.	38. CAREER CATEGORY C14 - DESV C20 - SUPV	39. FEALTY / HEALTH INSURANCE CODE 0 - WAIVED 1 - YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YEARS 3 - BREAK IN SERVICE MORE THAN 3 YEARS			42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM 1041 CODE NO. TAX EXEMPTIONS 1 - YES 2 - NO		44. STATE TAX DATA FORM 1041 CODE NO. TAX EXEMPT. STATE CODE		

SIGNATURE OR OTHER AUTHENTICATION

FORM 11-62 1150

Use Previous Edition

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

(When Filled In)

WJH/T
mte

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
				51 720 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last 1st Date	Grade	Step	Salary	Effective Date
GS 14	4	\$16,204	12/22/63	GS 14	5	\$16,712	12/19/65
7. TYPE ACTION				8. COMMENTS AND AUTHORIZATION			
PSI	LS	ADJ					
			/ NO EXCESS LWOP / IN PAY STATUS AT END OF WAITING PERIOD / LWOP STATUS AT END OF WAITING PERIOD / CLERKS INITIALS / AUDITED BY				
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE:				DATE		12 16 65	
PAY CHANGE NOTIFICATION							

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
 AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 4 OCTOBER 1962."
 EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
51 720	CF	GS 14	4	\$15,640	\$16,204

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

[illegible]

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI
MEMORANDUM DATED 1 AUGUST 1956; SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 9 JANUARY 1964.

NAME

SERIAL

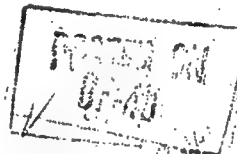
ORGN FUNDS

GR-ST

OLD
SALARY

NEW
SALARY

\$1 650 CF GS 14 4 \$14,120 \$14,965



WA-1

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
				51 650 CF			
NEW SALARY RATE							
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
GS 14	3	\$13,695	12/23/62	GS 14	4	\$14,120	12/22/63
7. TYPE ACTION							
PSI SM ADJ.							
8. Remarks and Authentication							
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY:							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE				DATE 12/22/63			
C/WH/Z				PAY CHANGE NOTIFICATION			

Form 9-61 360 Obsolete Previous Edition (4-51)

SECRET
(When Filled In)

13 MAY 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT		05 12 63		REGULAR							
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
<div> <div>V TO V</div> <div>U TO V</div> </div> <div> <div>U TO U</div> <div>U TO U</div> </div>		3135 5050 1000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP WH BRANCH 2											
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		0651		D							
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0135101		14 3		13695					
18. REMARKS											
<div> <div>POSTED ON</div> <div>13 MAY 63</div> </div>											
SPACE BELOW FOR EXTENSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. SERVICE CODING		21. STATION CODE		22. INTERVIEW CODE		23. REGIS CODE		24. DATE OF BIRTH	
37 10		64650 WH		04741		3					
25. DATE OF EXPIRY		26. SPECIAL REFERENCE		27. RETIREMENT DATA		28. SEPARATION DATA CODE		29. CORRECTION/REVISION DATA		30. SECURITY REQ. NO.	
										EOD DATA	
31. PREFERENCE		32. LEAVE CODE		33. LEAVE CODE		34. EMPLOY CATEGORY		35. RESLT/HEALTH INSURANCE		36. SOCIAL SECURITY NO.	
37. PREVIOUS GOVERNMENT SERVICE DATA		38. LEAVE ACC. AD		39. FEDERAL TAX DATA		40. STATE TAX DATA		41. STATE TAX DATA		42. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION											
<div> <div>POSTED</div> <div>05/13/63</div> </div>											

FORM 1150
11-62

Use Previous
Edition

SECRET 9 MAY 1963

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

LLG: 21 DEC. 62

SECRET
(When Filled In)

OCB												NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER												2. EFFECTIVE DATE MO. DA. YR. 12 23 62																	
3. PROMOTION												4. CATEGORY OF EMPLOYMENT REGULAR																	
6. FUNDS V TO V CF TO V X CF TO CF												7. COST CENTER NO. CHARGEABLE 3135 5050 1000																	
9. ORGANIZATIONAL DESIGNATIONS DOP WH BRANCH 2												8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J																	
11. POSITION TITLE OPS OFFICER												10. LOCATION OF OFFICIAL STATION																	
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS												12. POSITION NUMBER 0848																	
15. OCCUPATIONAL SERIES 0136.01												13. CAREER SERVICE DESIGNATION D																	
16. GRADE AND STEP 14 3												17. SALARY OR RATE 13695																	
18. REMARKS																													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																													
19. ACTION CODE 22		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 61650 WH				22. STATION CODE 04041				23. INTEGRAL CODE 3		24. NIGHT CODE				25. DATE OF BIRTH MO. DA. YR. 12 23 62				26. DATE OF GRADE MO. DA. YR. 12 23 62				27. DATE OF LST MO. DA. YR. 12 23 62			
28. HIE EXPIRES MO. DA. YR. 80				29. SPECIAL REFERENCE 80				30. RETIREMENT DATA 1. CIL 2. FICA 3. NONE				31. SEPARATION DATA CODE				32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.				33. SECURITY REG. NO.				34. SER					
35. VET. PREFERENCE CODE 0 - NONE 1 - 0 PT. 2 - 10 PT.				36. SERV. COMP. DATE MO. DA. YR.				37. LONG. COMP. DATE MO. DA. YR.				38. CAREER CATEGORY CODE 0 - CIVIL 1 - MILITARY				39. FEGLI / HEALTH INSURANCE CODE 0 - DRIVER 1 - YES				40. SOCIAL SECURITY NO.									
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS.) 3 - BREAK IN SERVICE (MORE THAN 3 YRS.)								42. LEAVE CAT. CODE				43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1 - YES 2 - NO				44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1 - YES 2 - NO				45. STATE CODE									
SIGNATURE OR OTHER AUTHENTICATION																													
POSTED 21/14/63 2/15																													

FORM 1150
4-62

Use Previous Edition

21-1082

SECRET

100-1
100-100-100
100-100-100
100-100-100

(When Filled In)

(4-61)

110

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 794 AND
DCI MEMORANDUM DATED 1 AUGUST 1964, SALARY IS ADJUSTED AS FOLLOWS:
EFFECTIVE 14 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST	OLD SALARY	NEW GR-ST	NEW SALARY
	44650		CF	13 5	\$11575	13 5	\$12610

FOR
JH

ABM: 1 JUNE 62

SECRET
(When Filled In)

OAS NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
EXCEPTED APPOINTMENT (CAREER)				05/27/62		REGULAR					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		2135 5050 1000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP WH BRANCH 2											
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER-SERVICE DESIGNATION					
OPS OFFICER				0848		D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		13 5		11675					
18. REMARKS											
POSTED ON 26 June 62											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTERSEC CODE		24. HOURS CODE	
13		10		64650 WH		04041		3			
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF ECI		28. DATE OF SPECIAL REFERENCE		29. RETIREMENT DATA		30. SEPARATION DATA	
10/09/55		10/09/55		10/01/61		80		1		EOD DATA	
31. SECURITY REQ. NO.		32. VET. PREFERENCE		33. SERV. COMP. DATE		34. LONG COMP. DATE		35. MIL. SERV. CREDIT/UCD		36. FEGLI / HEALTH INSURANCE	
07894 M1		1		10/03/48		09/17/51		C		1	
37. PREVIOUS GOVERNMENT SERVICE DATA		38. LEAVE CAT CODE		39. FEDERAL TAX DATA		40. STATE TAX DATA		41. SOCIAL SECURITY NO.		42. SIGNATURE OR OTHER AUTHENTICATION	
1		6		0 0		0 0				26/07/62 UK	
1		1		1		1		1			

ARM: 1 JUNE 62

SECRET
(When Filled In)

OEF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER

2. NAME (LAST-FIRST-MIDDLE)

3. NATURE OF PERSONNEL ACTION

RESIGNATION

4. EFFECTIVE DATE

MO. DA. YR.
05 26 62

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

X

V TO V

V TO CP

CP TO V

CP TO CP

7. COST CENTER NO. CHARGEABLE

2235 1000 1000

8. CSC OR OTHER LEGAL AUTHORITY

9. ORGANIZATIONAL DESIGNATIONS

DDP WH
BRANCH 1

10. LOCATION OF OFFICIAL STATION

WASH., D. C.

11. POSITION TITLE

OPS OFFICER

12. POSITION NUMBER

0505

13. CAREER SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

13 5

17. SALARY OR RATE

11675

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGRATE CODE	24. REGIN CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LGS MO DA YR
28. MTR EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. TOL 2. PICA 3. NONE	31. SEPARATION DATA CODE 180009	32. CORRECTION CANCELLATION DATA TYPE MO DA YR	EOD DATA		33. SECURITY REG NO	34. SEX
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.	36. SERV. COMP. DATE MO DA YR	37. LONG. COMP. DATE MO DA YR	38. MIL. SERV. CREDIT/ICD 1 - YES 2 - NO	39. FESEA / HEALTH INSURANCE CODE CODE 0 - RAISED 1 - YES	HEALTH INS CODE		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO		45. STATE CODE		

SIGNATURE OR OTHER AUTHENTICATION

POSTED

06/04/62 ZJK

AES: 15 SEPT 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						09 15 61		REGULAR			
6. FUNDS		X		V TO V		V TO U		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
								2235 1000 1000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP WH BRANCH 1						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
OPS OFFICER						6505		D			
14. CLASSIFICATION SCHEDULE (GS, WD, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		13 4		11415			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEREST CODE	24. SPECIAL CODE	25. DATE OF BIRTH	26. DATE OF GRADE		27. DATE OF LST	
37	10	64300 WH		75013							
28. HSE EMPLOY		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	
										EOD DATA	
34. VET. PREFERENCE		35. SERV. COMP. DATE		36. LONG. COMP. DATE		37. DIS. SERV. CREDIT/LOD		38. PEGU / HEALTH INSURANCE		39. SOCIAL SECURITY NO	
40. PREVIOUS GOVERNMENT SERVICE DATA				41. LEAVE CAT CODE		42. FEDERAL TAX DATA		43. STATE TAX DATA			
SIGNATURE OR OFFICE AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 09/14/61 2/K </div>											

Form 110
6-60

Charles Previtera
Editor

SECRET




SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

425 1150 Onshore Pinnacles
Y 1150
650 7/25/61

SECRET

SECRET
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours		
				WH 74				
5. OLD SALARY RATE				6. NEW SALARY RATE				
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	
GS	13	4	\$11,415	04/03/60	13	5	\$11,675	10/01/61
7. TYPE ACTION								
PSI LSI ADJ.								
8. Remarks and Authentication ✓ NO EXCESS LWOP ✓ IN PAY STATUS AT END OF WAITING PERIOD ✓ IN LWOP STATUS AT END OF WAITING PERIOD <div style="text-align: right;">   </div>								
 PAY CHANGE NOTIFICATION								

Form 580
7-60

Obsolete Previous Edition

SECRET

(4-51)

L I

SECRET
(When Filled In)

BLT 30 SEPT 1960

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						10 02 60		REGULAR			
6. FUNDS		7. V TO V		8. V TO CF		9. COST CENTER NO. CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY			
X						1221 1000 1000		50 USC 403			
11. ORGANIZATIONAL DESIGNATIONS						12. LOCATION OF OFFICIAL STATION					
DOP						WASH., D. C.					
13. POSITION TITLE						14. POSITION NUMBER		15. CAREER SERVICE DESIGNATION			
OPS OFFICER						0356		D			
16. CLASSIFICATION SCHEDULE (GS, WB, etc.)			17. OCCUPATIONAL SERIES			18. GRADE AND STEP			19. SALARY OR RATE		
GS			0136.01			13 4			11415		
20. REMARKS											
<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>10-20 60 WP</p> </div>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE	22. EMPLOY CODE	23. OFFICE CODING		24. STATION CODE	25. INTEREST CODE	26. RATING	27. DATE OF BIRTH	28. DATE OF EXPIRE		29. DATE OF LEI	
37	10	44300	CA	75013		1					
30. HIR EXPIRES		31. SPECIAL REFERENCE		32. RETIREMENT DATA		33. SEPARATION DATA CODE		34. CORRECTION/CANCELLATION DATA		35. SECURITY RFO NO.	
NO DA				1. CAC 2. POC 3. NONE		CODE		TYPE NO DA		36. SEA	
								EOD DATA			
37. VET. PREFERENCE		38. SERV. COMP. DATE		39. LONG COMP. DATE		40. MIL SEER. CREDIT-LED		41. REGEL/HEALTH INSURANCE		42. SOCIAL SECURITY NO.	
CODE 0-NO 1-YES 2-10 YR		NO DA		NO DA		1-YES 2-NO		CODE 0-NO 1-YES		43. SOCIAL SECURITY NO.	
44. PREVIOUS GOVERNMENT SERVICE DATA				45. LEAVE (A)				46. FEDERAL TAX DATA			
CODE 0-NO PREVIOUS SERVICE 1-AT AGENCY IN SERVICE 2-BROKE IN 12-MONTH PERIOD 3-BROKE IN SERVICE MORE THAN 12 MON				CODE				47. STATE TAX DATA			
								48. STATE TAX DATA			
								49. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D			42 30	GS-13 4	\$10,610	\$11,415

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET
(When Filled In)

PAS: 25 JULY 1960															NOTIFICATION OF PERSONNEL ACTION									
1. Serial No.			2. Name (Last-First-Middle)						3. Date Of Birth			4. Vol. Prof.		5. Sex		6. CC-EOD								
									Mo. Da. Yr.			None-0 5 Pt-1 10 Pt-9		Code		M I		Mo. Da. Yr.						
																		Mo. Da. Yr.						
7. SCB			8. CSC Reint.		9. CSC Or Other Legal Authority		10. Apmt. Allidaw			11. FEGLI		12. LCI		13. Bt. from sta										
Mo. Da. Yr.			Yes-1 No-2		Code		Mo. Da. Yr.			Yes-1 No-2		Code		Mo. Da. Yr.		Yes-1 No-2		Code						
10 03 48			No-2 1		50 USCA 403					1 09 17 51		1 09 17 51		Yes-1 No-2 2										

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Section Code		
DOP FE BRANCH 3 PP SECTION				5161						57557		
16. Dept. - Field		17. Position Title		18. Position No.		19. Serr.		20. Comp. Series				
Dept - 2 USHD - 4 Fign - 6		Code 5 OPS OFFICER		0710		GS		0135.01				
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number		
13 4		\$ 10610		D		Mo. Da. Yr. 10 09 55		Mo. Da. Yr. 10 05 58		8 3780 55 006		

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT & TRANSFER TO VOUCHERED FUNDS		02		05 29 60		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Section Code	
DOP				4230		WASH., D.C.				75013	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serr.		37. Comp. Series			
Dept - 2 USHD - 4 Fign - 6		Code 2 OPS OFFICER		0399		GS		0135.01			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
13 4		\$ 10610		D		Mo. Da. Yr. 10 09 55		Mo. Da. Yr. 10 01 61		0221 1000 1000	
44. Remarks											
<p align="center">[Handwritten: 2.36.60 AS]</p>											

0. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
GS 13	2	\$10,130	04	07	57	GS 13	3	\$10,370	10	05	58

TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER

8. CHECK ONE ☐ NO EXCESS LWOP ☐ EXCESS LWOP
 IF EXCESS LWOP, CHECK FOLLOWING:
☐ IN PAY STATUS AT END OF WAITING PERIOD
☐ IN LWOP STATUS AT END OF WAITING PERIOD

9. NUMBER OF HOURS LWOP

10. INITIALS OF CLERK

11. AUDITED BY

TO BE COMPLETED BY THE OFFICE OF PERSONNEL

12. PROJECTED SALARY RATE AND EFFECTIVE DATE

GRADE	STEP	SALARY	MO	DA	YR

13. REMARKS

14. AUTHENTICATION

SECRET
(WHEN FILLED IN)

0. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
GS 13	2	\$10,130	04	07	57	GS 13	3	\$10,370	10	05	58

1. EMP. SERIAL NO.

2. NAME

3. ASSIGNED ORGAN.

4. FUNDS

5. ALLOTMENT

6. DDP/FE - 24

8. UV

REMARKS

PPR-722

CERTIFICATION

I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.

TYPED, OR PRINTED, NAME OF SUPERVISOR

DATE

SIGNATURE OF SUPERVISOR

PERIODIC STEP INCREASE

SECRET
(WHEN FILLED IN)

0. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
GS 13	3	\$10,370	10	05	58	GS 13	4	\$10,610	04	03	60

1. EMP. SERIAL NO.

2. NAME

3. ASSIGNED ORGAN.

4. FUNDS

5. ALLOTMENT

6. DDP/FE 20

8. UV

TO BE COMPLETED BY THE OFFICE OF COMPTROLLER

8. CHECK ONE ☒ NO EXCESS LWOP ☐ EXCESS LWOP
 IF EXCESS LWOP, CHECK FOLLOWING:
☐ IN PAY STATUS AT END OF WAITING PERIOD
☐ IN LWOP STATUS AT END OF WAITING PERIOD

9. NUMBER OF HOURS LWOP

10. INITIALS OF CLERK

11. AUDITED BY

TO BE COMPLETED BY THE OFFICE OF PERSONNEL

12. TYPE OF ACTION

13. REMARKS

14. AUTHENTICATION

PAY CHANGE NOTIFICATION

SECRET

OFFICIAL PERSONNEL FOLDER

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
		GS-13-2	\$ 9,205	\$10,130

GORDON W. STEWART
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DMG 7 FEB 58

1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth			4. Vet. Prof.		5. Sex		6. CS - ECD		
					Mo. Da. Yr.			None-0 5 Pt-1 10 Pt-2		Code		Mo. Da. Yr.		
								1		M 1		09 17 51		
7. SCD		8. CSC Retmt.		9. CSC Or Other Legal Authority		10. Appt. Allidat.		11. FEGLI		12. ECD		13. Encl. Vsp		
Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.		
10 03 48		1		50 USCA 403				1		09 17 51		2		

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP FE BR 5 OFFICE OF THE CHIEF				5121		WASH. D. C.				75013	
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dope - 1 USMID - 3 Frgn - 5		2 - AREA OPS OF D BR CH		3369		GS		0136.01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
13 2		\$ 9205		BP		10 109 155		10 105 158		8 3700 20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT TRANSFER TO UNVOUCHERED FUNDS		05		02 09 58		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP FE BRANCH 3 PP SECTION				5161						57557	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dope - 1 USMID - 3 Frgn - 5		OPS OFF PP		0710		GS		0136.31			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
13 2		\$ 9205		BP		10 109 155		10 105 158		8 3780 55 006	

44. Remarks

SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.

POSTED

C/M

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DWG.

1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet. Prof.		5. Sex		6. CS - FOD				
						Mo. Da. Yr.			None-0 5 Pt-1 10 Pt-2		Code		M 1		Mo. Da. Yr.		
7. SCD		8. CSC Reent.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.			11. FEGLI		12. LCD		13. M. S. Yr.				
Mo. Da. Yr.		Yes-1 No-2		Code		Mo. Da. Yr.			Yes-1 No-2		Mo. Da. Yr.		Yes-1 No-2				
10 03 48		No-2 1		50 USCA 403					No-2		03 17 51		No-2 2				

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP FE BR 5						WASH. D. C.					
OFFICE OF THE CHIEF											
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept - 2 USfld - 4 Frgh - 6		Code		303		GS		0136.01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
13.2		\$ 9205		DP		Mo. Da. Yr.		Mo. Da. Yr.		8 3700 20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT		56		11 17 57		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP FE BR 5				5121		WASH. D. C.				75013	
OFFICE OF THE CHIEF											
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept - 2 USfld - 4 Frgh - 6		Code		3309		GS		0136.01			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
13.2		\$ 9205		DP		10 10 55		10 10 55		8 3700 20	

44. Remarks

POSTED

11/21/57 *MP*

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED ORGAN.		4. FUNDS	5. ALLCOT			
					DDP/FE -14		V-20				
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
13	1	\$ 8,990	10	09	55	13	2	\$ 9,205	04	08	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED, OR PRINTED, NAME OF SUPERVISOR					DATE	SIGNATURE OF SUPERVISOR					
					139 MAR 57				CFE		
PERIODIC STEP INCREASE - CERTIFICATION											

FORM NO. 560
1 MAR. 55

SECRET

PERSONNEL FOLDER (11)

121

CENTRAL INTELLIGENCE AGENCY

CONFIDENTIAL

NOTIFICATION OF PERSONNEL ACTION

141

1. NAME (Last - First - Middle - One Given Name, Initial(s), and Surname) <div></div>		2. DATE OF BIRTH <div></div>		3. JOURNAL OR ACTION NO. <div></div>		4. DATE 5 Dec 1956	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (Use Standard Terminology) Reassignment 01				6. EFFECTIVE DATE 2 Dec 1956		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USC 403 j	
FROM Ops Officer (PT) HF-923 GS-0156.31-13 \$8990.00 per annum HF/TS Branch 5 <div></div> <div></div>				8. POSITION TITLE Area Ops Officer (CH) HF-303-13 GS-0156.01-13 \$8990.00 per annum HF/TS Branch 5 <div></div>		TO Washington, D. C.	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL				<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL			
13. VETERAN'S PREFERENCE NONE WWII OTHER 5 PT. 10 POINT <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				14. POSITION CLASSIFICATION ACTION NEW VICE I. A. FINAL SD/EP			
19. SEX M		16. APPROPRIATION FROM: 7-3745-55-042 TO: 7-3700-20 750-13		17. SURVIVOR IS C. S. RETIREMENT ACT YES		18. DATE OF APPOINTMENT AFFIDAVIT (Accessions Only) STATE:	
20. REMARKS: 3 MOD 09/17/51 "Transfer to Vouchered Funds FROM Unvouchered Funds." <div style="text-align: right;">FILED 60- 7934</div> <div style="text-align: center;">CONFIDENTIAL</div> ENTRANCE PERFORMANCE RATING: Director of Personnel							

4. PERSONNEL FOLDER COPY

20 12/06/56

SECRET
 (WHEN FILLED IN)

NOTIFICATION OF PERSONNEL ACTION

MJW

1. NAME (MR., MRS., MSG., ONE GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH		3. JOURNAL OR ACTION NO.		4. DATE	
						6 Sept 1956	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)				6. EFFECTIVE DATE		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Conversion from <input type="checkbox"/> Status 60				26 Aug 1956		5C USCA 403 J	
FROM		TO					
Ops. Officer (PP) (Info. Officer)		BFF-923		Ops. Officer (PP)		BFF-923	
GS-0136.31-13 \$8990.00 per annum (<input type="checkbox"/> \$8015.00 per annum)		8. POSITION TITLE		GS-0136.31-13 \$8990.00 per annum			
		9. SERVICE, SERIES, GRADE, SALARY		DDP/FE Branch 5			
		10. ORGANIZATIONAL DESIGNATION					
		516900					
		11. HEADQUARTERS					
		5					
		12. FIELD OR DEPT.					
<input checked="" type="checkbox"/> FIELD		<input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD		<input type="checkbox"/> DEPARTMENTAL	
13. VETERAN'S PREFERENCE				14. POSITION CLASSIFICATION ACTION			
NONE WWII OTHER 5-PT. 10-POINT <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				RED VICE I. A. REAL <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
				SD/DP			
16. RACE		17. APPROPRIATION		18. SUBJECT TO C. S. RETIREMENT ACT		19. DATE OF APPOINTMENT AFFIDAVIT (ACQUISITIONS ONLY)	
W		FROM: 3745-55-042 TO: same 430-51		YES NO YES			
						20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
(MARKS) 3 EOD POSTED 10 SEP 1956 WJR							

SEE PERFORMANCE RATING

Director of Personnel

SIGNATURE OR OTHER AUTHENTICATION

1. EMPLOYEE COPY

ET

25 9/7/56

SECRET
(WHEN FILLED IN)

NOTIFICATION OF PERSONNEL ACTION

TVB

1. NAME (MR., MRS., MISS, ONE GIVEN NAME, INITIAL(S), AND SURNAME) <div></div>		2. DATE OF BIRTH <div></div>	3. JOURNAL OR ACTION NO. <div></div>	4. DATE 4 October 1955
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) PROMOTION		6. EFFECTIVE DATE 9 Oct. 1955	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403 j	
FROM Ops Officer (PP) RFF-923-12 OS-0136.31-12 \$7785.00 per annum Branch 5		8. POSITION TITLE Ops Officer (PP) RFF-923 OS-0136.31-13 \$8990.00 per annum DDP/FE Branch 5	TO <div></div>	
9. SERVICE, GRADE, SALARY		10. ORGANIZATIONAL DESIGNATION <div></div>	11. HEADQUARTERS <div></div>	
12. FIELD OR DEPT. <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT. <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> 8D-DP		
15. SEX M	16. RACE W	17. APPROPRIATION FROM: 6-5745-55-042 TO: BAND	18. SUBJECT TO C. 9. RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) <div></div>
20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <div></div>		21. REMARKS <div></div>		

POSTED
10/10/55

ESTRACE PERFORMANCE RATING:
Director of Personnel

2. SIGNATURE OR OTHER AUTHENTICATION

SECRET

1. EMPLOYEE COPY

recd 10/4/55

3. and organizational designations

U. S. GOVERNMENT PRINTING OFFICE: 1952 O 07374

4. Pay roll

5. Signature

6. Slip No.

has appropriate)

8-12 870.0

PAY ROLL CHANGE DATA

	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F. I. C. A.	NET PAY
7. Previous normal								
8. New normal								
9. Pay rate period								
10. Remarks								

TO OCT 19 15 04

FINANCE DIVISION

PURSUANT TO DCI DIRECTIVE
EFFECTIVE 13 MAR. 1955
ADJUSTED TO: 7785

11. Approval(s)

12. Prepared by

8 Sep 54

13. Audited by

☒ Periodic step-increase

☐ Pay adjustment

Other step-increase

14. Effective date

15. Date last equivalent

16. Old salary

17. New salary

18. Performance rating is satisfactory or better.

24 Oct 54

26 Apr 53

670.0

572.0

19. LWOP data (fill in appropriate spaces covering LWOP during following periods):
Period(s)

☐ No excess LWOP. Total excess LWOP

(Check applicable box in case of excess LWOP)

() Excess LWOP of more than 30 days

() Excess LWOP of 30 days or less

STANDARD FORM NO. 1126d- Revised

Form prescribed by Comp. Gen., U. S.

May 8, 1950, General Regulations No. 102

PAY ROLL CHANGE SLIP—PERSONNEL COPY

REQUEST FOR PERSONNEL ACTION

Unvouchered

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
			17 Feb 54
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment B. POSITION (Specify whether establish, change grade or title, etc.)		6. EFFECTIVE DATE A. PROPOSED: FEB 28 1954 B. APPROVED: FEB 28 1954	7. C.S. OR OTHER LEGAL AUTHORITY
FROM: Intelligence Officer GS-5 GS-12 \$7040. p/a DIP/PP	8. POSITION TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS	TO: O-2 Officer (PP) ERF-923 GS-0136.31--12 \$7040. p/a Same	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	

8. REMARKS (Use reverse if necessary)

9. REQUESTED BY (Name and title)

D. REQ

Signature

Title:

PE Personnel Officer

13. VETERAN PREFERENCE

NAME	WV	OTHER	S.P.T.	10 POINT
				DISAB. OTHER

14. POSITION CLASSIFICATION ACTION

NEW	VICE	I.A.	REAL
-----	------	------	------

CD:PP DP

15. APPROPRIATION	16. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	17. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	18. LEGAL RESIDENCE
FROM: 4-3745-55-042 TO: SURE	Yes		<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:

21. STANDARD FORM 50 REMARKS

22. REFERENCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CELL OR POS CONTROL	JR	83 Feb 54	
C. CLASSIFICATION			
D. PLACEMENT OR EXPL.			
E.			

F. APPROVED BY

2-24-54

STANDARD FORM 52 FORM 52 OF THE U. S. CIVIL SERVICE COMMISSION JANUARY 1954 - FEDERAL PERSONNEL BOARD, OFFICE IN				7/17/54 8/4/54 Sam	
REQUEST FOR PERSONNEL ACTION					
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.					
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		2. DATE OF BIRTH <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		3. REQUEST NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		5. EFFECTIVE DATE A. PROPOSED: 23 JUL 1954		7. C. S. OR OTHER LEGAL AUTHORITY <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
6. POSITION (Specify whether establish, change grade or title, etc.) FROM: INTELLIGENCE OFFICER # 5-5 Ops Officer (PP) BPP 923 GS-0136-11-10 \$7040.00 P/A 65-132-12 UDP/FE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		8. POSITION TITLE AND NUMBER: 9. SERVICE GRADE AND SALARY: 10. ORGANIZATIONAL DESIGNATION: 11. HEADQUARTERS: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		TO: Information Officer BPP 923 FGS-5 \$7095.00 P/A UDP/FE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
<input checked="" type="checkbox"/> FIELD		<input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD	
12. FIELD OR DEPARTMENTAL					
A. REMARKS (Use reverse if necessary) <div style="border: 1px solid black; height: 40px; width: 100%;"></div>					
13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER 5 PT. <input checked="" type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. OTHER <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> CD : PP			
15. SEX M <input checked="" type="checkbox"/> W <input type="checkbox"/>		16. RACE W <input checked="" type="checkbox"/>		17. APPROPRIATION FROM: 5-3745-55-042 TO: Same	
18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: PENN	
21. STANDARD FORM 50 REMARKS <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <div style="position: absolute; top: 10px; right: 10px; border: 2px solid black; padding: 5px; text-align: center;"> POSTED JUL 6 1954 </div>					
22. CLEARANCES		INITIAL OR SIGNATURE		DATE	
A.		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
B. CEIL. OR POS. CONTROL		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
C. CLASSIFICATION		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
D. PLACEMENT OR EMPL.		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
E.		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
F. APPROVED BY <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					

CENTRAL INTELLIGENCE AGENCY

~~SECRET~~

NOTIFICATION OF PERSONNEL ACTION

CON. 13 NOV. 53 REG

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO. & DATE
			14 Dec. 53
This is to notify you of the following action affecting your employment:			
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Reassignment		B. O. B. 20 Dec 53	50 USCA 403
FROM		TO	
Operations Officer (PW) BF-93		Intelligence Officer BF 8-5-12	
GS-132-12 \$7040.00 per annum		GS-132-12 \$7040.00 per annum	
DDP/VE Political & Psychological Warfare Political & Psychological Warfare Sect		DDP/VE	
Washington, D. C.			
11. HEADQUARTERS			
12. FIELD OR DEPTL		12. FIELD OR DEPTL	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NONE <input type="checkbox"/> WH <input type="checkbox"/> OTHER <input type="checkbox"/> S-P <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAD <input type="checkbox"/> OTHER <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/>	
claimed		CD-PP	
15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)
M	W	FROM: 4-3700-20 TO: 4-3745-55-042	Yes
19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE	
		<input type="checkbox"/> CLAIMED <input type="checkbox"/> MOVED STATE:	
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.			
"Transfer TO Unvouchered funds FROM Vouchered funds."			

~~SECRET~~

ENTRANCE PERFORMANCE RATING:

Personnel Director

4. PERSONNEL FOLDER COPY

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE 16 Apr. 53
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) Promotion		6. EFFECTIVE DATE 26 Apr. 53	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY Schedule A-6.116(b)	
FROM Operations Officer (PW) BF-93-11 68-132-11 \$5940.00 per annum DOP/YB Political and Psychological Warfare Political and Psychological Warfare Section Washington, D.C.		8. POSITION TITLE 9. SERVICE, SERIES, GRADE, SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS	TO 68-132-12 \$7040.00 per annum Same Same Same Same	
12. FIELD OR DEPTL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 1-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>		
14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> RETAL. <input type="checkbox"/>		15. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		
16. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) yes		17. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED State of ...		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
ENTRANCE PERFORMANCE RATING				
Chief, Personnel Division				

3. PERSONNEL FOLDER COPY

Form 1-1-51

(1) Staff or Division FE (2) Date T/O Approved 17 November 1952 (3) Effective date of Action 7 December 1952

(4) NAME	(5) ORG. INF. & POS. TITLE	(6) SCHEDULE SERIES-GRADE	(7) SLOT NOS.	(8) ACTION	(9) ORG. INF. & POS. TITLE	(10) SCHEDULE SERIES-GRADE	(11) SLOT NOS.
	Intell Off.	GS-13	581		Pol & Dev F Stn O/C	GS-132-13	BF-98
	Secy-Steno	GS-6	501		Ops Off-Fls	GS-312-6	BF-90
	Ops Off	GS-14	1173		Secy-Steno	GS-312-6	BF-90
	Ops Off	GS-12	523		Pol & Dev F Stn O/C	GS-132-14	BF-91
	Intell Off	GS-11	521		Ops Off-Fls	GS-132-12	BF-92
	Intell Off	GS-7	525		Ops Off P/M	GS-132-11	BF-93
					Ops Off P.T.	GS-132-11	BF-93
					Ops Off-R.A.	GS-132-7	BF-94

(12) APPROVED BY: [Signature]
Staff or Division Chief

(13) APPROVED BY: [Signature]
Class. & Regs Div.
S E C R E T
Security Information

(14) APPROVED BY: [Signature]
Personnel Div.

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS. — ONE GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
			81389	24 Mar. 52'
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment & Promotion		30 Mar. 52'	Schedule A-6.116(b)	
FROM		TO		
Intelligence Officer		Operations Officer		
03-9-132 \$3060.00 per. annum.		03-11-132 \$3940.00 per. annum.		
OFC FE Plans Branch		OFC FE Plans & Operations Branch Psychological Warfare Unit		
Washington, D. C.				
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
DURE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 10-POINT DISAB. OTHER		NEW <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> BU. 79881 3/13/52'		
15. DEL. <input type="checkbox"/> 16. RACE: <input type="checkbox"/>		17. APPROPRIATION		18. SUBJECT TO C. S. RETIREMENT ACT (YES - NO)
FROM 2123300		TO: 2017		Yes
19. DATE OF APPOINTMENT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE		
		<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STAFF: Panama		
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
(321)				
Chief, Personnel Division				
ENTRANCE EFFICIENCY RATING: ACTION				

1. PERSONNEL FOLDER COPY

STANDARD FORM NO. 10 PART 1
REVISED 1-55
PREPARED BY
OFFICE OF PERSONNEL
U. S. CIVIL SERVICE COMMISSION

7.C. 8/29/51

(al)

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
			8003	17 Sept. 1951
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Accepted Appointment		17 Sept. 1951	Schedule A-6.116(b)	
FROM		TO		
		Intelligence Officer, GS-9		
		03-9-132 \$4600.00 per. annum.		
		OPC FE Plans Branch		
		Washington, D. C.		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
15. RACE		16. DATE OF APPOINTMENT-AFFIDAVIT (EXCEPTIONS ONLY)		
17. APPROPRIATION		18. LEGAL RESIDENCE		
2123900		Bu. #2974 CSO/3051 6/2/49		
2123900		20. DATE OF APPOINTMENT-AFFIDAVIT (EXCEPTIONS ONLY)		
2123900		20. DATE OF APPOINTMENT-AFFIDAVIT (EXCEPTIONS ONLY)		
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND REVIEW BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
(71302)				
WANT TO DCI DIRECTIVE				
24 OCT. 1951				
ADJUSTED TO 5760				
This appointment is subject to the satisfactory completion of a trial period of one year.				
Subject to a satisfactory medical examination.				
Affidavit Executed.				
COB - 04/24/53 CSO - 09/17/57 CC - 07/17/57				
Personal Division				
22. SIGNATURE OR OTHER AUTHENTICATION				
4. PERSONNEL FOLDER COPY				

SECRET

OFFICE OF PERSONNEL (OP)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of performance. Give recommendations for training. Comment on foreign language competence, if required. **REMARKS** or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

8 Jan 1973

SIGNATURE OF EMPLOYEE

/S/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

8 Jan 1973

OFFICIAL TITLE OF SUPERVISOR

Operations Officer

TYPED OR PRINTED NAME AND SIGNATURE

/S/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the above. The loss to the Station is greater than usual for Subject is retiring and thus his considerable talents will probably be unavailable to the Agency, unless some special arrangements are made in the future, depending on what he ends up doing.

I am personally sorry to see this friend leave the Agency and I know further that it will be hard to replace his abilities in various operational fields, including that of good contacts in the community here. He has served the Agency well here and in many other posts and his leaving is a loss to us.

DATE

8 Jan 1973

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/S/

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>			2. DATE OF BIRTH P. 500 <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>		3. GRADE GS-14
4. OFFICIAL POSITION TITLE Operations Officer			5. OFFICE OF & ASSIGNMENT 6. CURRENT STATION DDP/WII/1		
7. CHECK (X) TYPE OF APPOINTMENT			8. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
9. DATE REPORT DUE IN O.P.			10. REPORTING PERIOD (From - to) April 1971 - 31 December 1971		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described. P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected. S-Strong Performance is characterized by exceptional proficiency. O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER O
SPECIFIC DUTY NO. 2					RATING LETTER S
SPECIFIC DUTY NO. 3					RATING LETTER S
SPECIFIC DUTY NO. 4					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Remarks of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

FEB 25 1 42 PM '72

Subject is now well into his second tour at this station and has not lost any of his momentum. He charges into his work daily as if it were all a new challenge and new experience. His past fitness reports from this station have all reflected his professional approach to the job and he continues to merit these plaudits. He is conscientious, dedicated and a team worker. He takes direction well and takes great pride in meeting deadlines. One of our more imaginative officers who is effective.

Yet, with all of this, he has not progressed in the organization as he should have. It has been recommended that he be considered for promotion and/or a chance in a command job. The station is presently considering some reorganization which will give Subject an opportunity to manage and direct activity which will be diversified and a change from the specialized jobs he has held in the past. This will be another excellent test for him and we are optimistic in that he will handle this new assignment with the same degree of expertise that we have learned to expect from him.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

9 Feb 1972

SIGNATURE OF EMPLOYEE

/s/

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

9 Feb 1972

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with all of the above. Concerning his performance here and his delay in getting a promotion, I made a special point of bringing these matters to the attention of Deputy Chief, WOMACE, while I was in Washington in October of 1971. Our pending reorganization would find him with considerably increased responsibility, which is a good indicator of how we feel about him.

DATE

9 Feb 1972

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/

SECRET

SÉCRET

FITNESS REPORT

EMPLOYEE SERIAL NUMBER

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
<div>SECTION A</div> <div>GENERAL</div> <div>1. NAME (Last) (First) (Middle)</div> <div>2. DATE OF BIRTH</div> <div>3. SEX</div> <div>4. GRADE</div> <div>5. SD</div> <div>6. OFFICIAL POSITION TITLE</div> <div>7. OFF/DIVISION OF ASSIGNMENT</div> <div>8. CURRENT STATION</div> <div>9. CHECK (X) TYPE OF APPOINTMENT</div> <div>10. CHECK (X) TYPE OF REPORT</div> <div>11. DATE REPORT DUE IN O.P.</div> <div>12. REPORTING PERIOD (From - to)</div>					
<div>SECTION B</div> <div>PERFORMANCE EVALUATION</div> <div>U-Unsatisfactory</div> <div>M-Marginal</div> <div>P-Proficient</div> <div>S-Strong</div> <div>O-Outstanding</div>					
<div>SPECIFIC DUTIES</div> <div>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</div> <div>SPECIFIC DUTY NO. 1</div> <div>SPECIFIC DUTY NO. 2</div> <div>SPECIFIC DUTY NO. 3</div> <div>OVERALL PERFORMANCE IN CURRENT POSITION</div>					
<div>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</div>					

SECRET

[illegible]

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Managerial performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject, a senior officer in Annals 16 1 30 71, has been at this station for the past 20 months as the responsible officer. His past fitness report covered very thoroughly and accurately his ability to

 He enjoys his work and the challenge of being on the spot. He is a thoroughly experienced officer in his field and although forced to specialize for years, we must start thinking of more responsible and more diversified employment for this fine officer.

He is conscientious, dedicated and a team worker. He takes direction well and takes great pride in completing his obligations on schedule. One of the more imaginative officers of the station who is aggressive and effective. He handles his financial responsibilities well and has a good appreciation for the expenditure of official funds.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.

DATE

26 March 1971

SIGNATURE OF EMPLOYEE

/s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

26 March 1971

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

26 March 1971

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/

-CONTINUED

SECRET

SECTION C

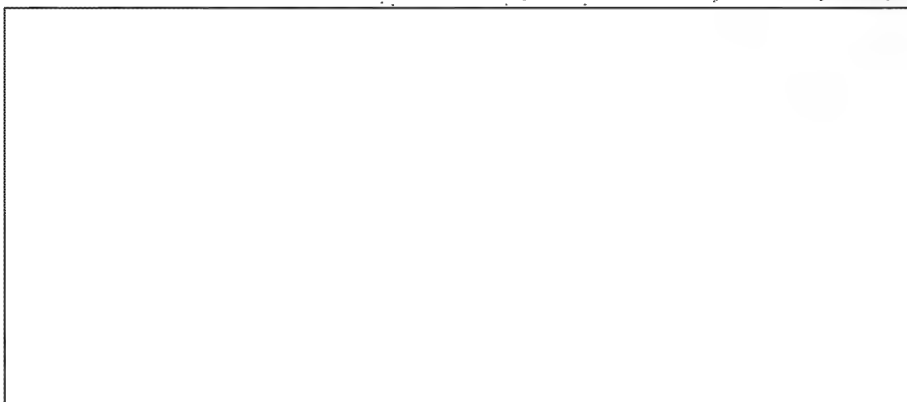
NARRATIVE COMMENTS

-continued

long hours, devoted his full efforts and produced remarkably when we needed him. He can always be expected to perform in this manner.

COMMENTS OF REVIEWING OFFICIAL

-continued



SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>
SECTION A GENERAL					
1. NAME (Last, First, Middle) <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0;"></div>		2. DATE OF BIRTH <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0;"></div>		3. SEX M	4. GRADE GS-14
5. OFFICIAL POSITION TITLE Ops Off.		6. OFF-DUTY OR ASSIGNMENT DDF/WH/Br. 1		7. CU <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0;"></div>	
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 05/70			12. REPORTING PERIOD (From - to) June 1969 - April 1970		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
S					RATING LETTER S
S					RATING LETTER S
S					RATING LETTER S
S					RATING LETTER S
S					RATING LETTER S
S					RATING LETTER S
SPECIFIC DUTY NO. 4					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</small></p> <p>Subject has his goals clearly in mind and has proceeded about his business with full confidence and perseverance. He is conscientious, dedicated and a team worker. Subject has gained the confidence of his supervisors and his subordinates have accepted him as one of the group.</p> <div style="border: 1px solid black; height: 30px; width: 100%; margin: 10px 0;"></div> <p style="text-align: center;">He was commended for this work by both Headquarters and Station management.</p> <p>He has developed [] contacts at all levels and has been very instrumental in developing disseminable information in this manner. He has quickly moved to replace assets which were terminated and by his efforts will fill in the void in a minimum amount of time.</p> <p>Subject enjoys meeting people and conducting operations. In the future, he will be forced to spend more time in managing his section due to administrative changes now taking place in the Station.</p> <p>He takes directions well and can be depended upon to fulfill all his obligations on schedule. He has an excellent command of the Spanish language and he is definitely cost conscious in the projects which he handles.</p> <p>Of special note is that Subject was one of the first officers to quickly retool his section when given a new requirement to fulfill. He responded immediately and in so doing once more indicated his desire</p>			
SECTION D		CERTIFICATION AND COMMENTS	
-continued			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE 05/15/70	SIGNATURE /s/ []		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:		
DATE 05/15/70	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE /s/ []	
3. BY REVIEWING OFFICIAL			
<p><small>COMMENTS OF REVIEWING OFFICIAL</small></p> <p>Concur fully with above and would add that Subject is one of the Station's most aggressive and effective development/contact officers. In what has been an almost complete reorganization of the Station and the termination or redirection [] Subject has probably moved faster and more effectively than any other section. Perhaps even more notable, his development of [] has more than kept pace with the termination of those who have outlived their usefulness. While he is very thorough and effective in all of his undertakings, a tendency to go off on tangents has a slight effect on his overall efficiency. This is probably due in large</p> <p style="text-align: right;">-continued</p>			
DATE 05/15/70	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station		TYPED OR PRINTED NAME AND SIGNATURE /s/ []

SECRET

SECTION C

NARRATIVE COMMENTS

Continued

to operate in a manner which best suited Station's objectives.

COMMENTS OF REVIEWING OFFICIAL

Continued

part to his considerable mental agility and imaginativeness,
and as such could hardly be called a weakness.

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (First) (Middle)		3. SEX		4. GRADE	5. SD
		M		GS-14	D
6. OFFICIAL POSITION TITLE			8. CURRENT STATION		
Ops Officer			Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
30 April 1969			July 1968 to 31 March 1969		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Help to establish and monitor the political action priorities and plans of the Division, including commenting on policy papers and plans originating outside the Division.					RATING LETTER P
SPECIFIC DUTY NO. 2 Prepare guidance to accomplish priority area-wide objectives.					RATING LETTER S
SPECIFIC DUTY NO. 3 Advise and consult with the Branches and Desks concerning the management of political activities.					RATING LETTER S
SPECIFIC DUTY NO. 4					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

mind comes forth with many operational concepts and ideas ranging from simple, quite routine matters to complicated and carefully shaded activities. It is to be expected that within this enthusiastic outpouring, practical details of implementation are sometimes buried. In these instances, quickly trims his sails and comes forth with the needed realistic approach. In short, he is a fine operations officer, more competent and at ease in real as against planning or policy situations.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTION A, B, AND C OF THIS REPORT			
DATE	SIGNATURE		
24 February 1969			
2. MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
24 February 1969	C/WH/		
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<div style="text-align: center;"> <div style="border: 1px solid black; display: inline-block; width: 200px; height: 20px; margin-bottom: 5px;"></div> I concur in this report, </div>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	DATE
26 February 1969	WH/Executive Officer		

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. SEX	4. GRADE	5. SD
			M	GS-14	D
6. OFFICIAL POSITION TITLE			7. OFF DIV/BR OF ASSIGNMENT		
Instr Ops			DDS/OTR		
9. CHECK (X) TYPE OF APPOINTMENT			8. CURRENT STATION		
XX CAREER			Hdqs. WPA/CB		
CAREER-PROVISIONAL (See Instructions - Section C)			10. CHECK (X) TYPE OF REPORT		
SPECIAL (Specify):			XX ANNUAL		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
30 April 1968			1 April 1967 to 29 March 1968		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
					S
SPECIFIC DUTY NO. 2					RATING LETTER
	S				
SPECIFIC DUTY NO. 3					RATING LETTER
					S
SPECIFIC DUTY NO. 4					RATING LETTER
					S
SPECIFIC DUTY NO. 5	DE 50 - DM 60				RATING LETTER
	DE 70				S
SPECIFIC DUTY NO. 6					RATING LETTER
					S
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
X O MAY 1968					S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

The resonance which these new courses has evoked confirms the soundness of creative efforts in completely revamping Covert Action training in the (cont.)

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

10 May 68

2.

BY SUPERVISOR

WHY THE EMPLOYEE HAS BEEN UNDER MY SUPERVISION

6

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

10 May 1968

OFFICIAL TITLE OF SUPERVISOR

Chief, Headquarters Training, Operations School/OTR

TY

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur. [] has done his job with distinction and with credit to himself and his career service. His assignment to OTR is a first-rate example of quality in rotational tours. At the same time he has given a good deal to the training mission, I think it also fair to say he has gained professionally from the rather wide exposure to disciplines other than CA which he has handled extremely well.

DATE

10 May 1968

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, Operations School/OTR

TYPE

SECRET

SECRET

SECTION C - NARRATIVE COMMENTS, [] (cont.)

Agency. In design and content the new courses reflect thoughtfulness, imagination, and realism--a combination of traits only too seldom encountered.

As a corollary to the main duties cited above, [] has also successfully run, in conjunction with FE Division, a Psychological Warfare Operations Course for military officers being assigned to MACV/SOG in Saigon.

[]

In February 1968 [] was asked to assume responsibility as Tradecraft Advisor and Coordinator for the Operations Support Course, a critical block of instruction []

[] Although, strictly speaking, this teaching and coordination task was outside [] normal purview and main area of expertise, he accepted this additional responsibility with exemplary willingness, and then proceeded to discharge it smoothly, energetically, and effectively. In addition to managing an extensive live problem, the Tradecraft Advisor must ensure that presentations by a number of instructors result in a balanced and coherent coverage of all operational subjects in the course. This entails the coordination of efforts of several senior and experienced instructors, all under the nominal aegis of the course's Chief Instructor, and, thus, demands a great deal of finesse and tact. [] has not only fulfilled this difficult role in a highly efficient manner but has also drawn on his own long Field experience for pertinent and meaningful contributions to the course.

[] occasionally handles Branch-wide administrative tasks and in my absence functions as Acting Chief, Headquarters Training Branch, to my complete satisfaction. At such times he has exercised supervisory responsibilities well. He is cost conscious and makes effective use of personnel, space, equipment, and funds.

SECRET

SECRET

In summary, [] is a mature and responsible officer, keeps things nicely in perspective, and has a good sense of priorities. In tackling problems he strives to make molehills out of mountains, which is a refreshing change; in short, a dedicated and intelligent officer and, withal, unfailingly cordial and cooperative.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
				M	GS-14 D
6. OFFICIAL POSITION/TITLE			7. OFFICE/BRANCH OF ASSIGNMENT 8. CURRENT STATION		
Ingr Operations			DDS/OTU Headquarters WAC		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
28 April 1967			1 April 1966 - 31 March 1967		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Chief Instructor for Covert Action subjects presented in Headquarters Training					S
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

APR 21 9 27 AM '67

Since his assignment to Headquarters Training Branch of the Operations School, [] has been principally engaged in a thorough study and review of all courses in Covert Action previously given in OTR. This has been a long and complicated job, the difficulty of which has been compounded by the necessity, at least in part through public events, to plan and project a total revision of instruction in the CA field. As a result, [] has not yet had the opportunity to teach. This will come shortly, however, when a new course begins on 8 May. The "Strong" rating given him here is based on the excellent work and thoroughly professional approach he has taken in all of the preparatory work he has undertaken. He has been eminently successful in establishing useful new relationships and in maintaining his old contacts in the Clandestine Services for the purpose of laying a solid groundwork for high quality training. In addition to his responsibilities in OTR he has been regularly consulted [] in a survey of one of its activities. This is fine testimony for the regard in which he is held outside the confines of his present job. The prognosis for a very effective performance in all of his teaching assignments is excellent. He has no supervisory responsibilities and is average in cost consciousness.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

DATE	I CERT	BY	C OF THIS REPORT
10 April 1967		[]	

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
6		
DATE	OFFICIAL TITLE OF SUPERVISOR	TY
7 April 1967	Chief, Headquarters Training	[]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL	
As noted above, [] for several valid reasons, has not done much teaching in his first six months in the Operations School, but judging from the way he handles himself in preparing his courses, he will be a very effective teacher once he begins, which will be very soon.	
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL
13 April 1967	Chief, Operations School/TR []

SECRET

SECRET

FITNESS REPORT

EMPLOYEE SOCIAL NUMBER

FITNESS REPORT		EMPLOYEE SERIAL NUMBER	
SECTION A		GENERAL	
1. NAME	(Middle)	3. SEX	4. GRADE
5. OFFICIAL POSITION TITLE		6. DATE OF ASSIGNMENT	7. CURRENT STATION
Ops Officer		DDP/WI/4	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT	
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)		<input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> SPECIAL (Specify)		<input type="checkbox"/> SPECIAL (Specify)	
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)	
		1 April - 28 August 1968	
SECTION B PERFORMANCE EVALUATION			
W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.			
P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.			
S - <u>Strong</u> Performance is characterized by exceptional proficiency.			
O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES			
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employee's with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).			
SPECIFIC DUTY NO. 1		RATING LETTER	
Operational and administrative management of activities.		S	
SPECIFIC DUTY NO. 2		RATING LETTER	
		S	
SPECIFIC DUTY NO. 3		RATING LETTER	
		P	
SPECIFIC DUTY NO. 4		RATING LETTER	
Preparation of operational, contact and dissemination reports.		S	
SPECIFIC DUTY NO. 5		RATING LETTER	
Preparation of operational programs, projects and briefing papers		S	
SPECIFIC DUTY NO. 6		RATING LETTER	
30 DEC 1968			
OVERALL PERFORMANCE IN CURRENT POSITION			
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.			
S			

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify all ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject has been under the direct guidance and supervision of this rating officer for a period of 14 months. This report is being submitted because of the transfer of the employee. For the last 6 weeks of the period covered by this report Subject was under the direct supervision of the COS because of the absence [redacted] of this rating officer. Any differences of opinion with respect to the caliber of Subject's performance during the last six weeks will be reflected in the reviewing officer's comments.

During this period, as in the preceding period, Subject carried out all of his assigned duties and responsibilities in a highly professional and thoroughly competent manner. He continued to show a good deal of initiative and imagination [redacted] on day to day matters. He demonstrated a keen sense of the internal political situation and he made maximum use of his contacts to elicit a large amount of disseminable information. Subject took over [redacted] during this period and he was able, because of his deep knowledge and understanding of the operational techniques employed [redacted] to improve on the quality of the [redacted] product. Subject is an able and fully qualified officer who acquired a good deal of expertise about local operating conditions and then proceeded to apply his specialized knowledge and past experience [redacted]. He has a great capacity for creative

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, D, AND C OF THIS REPORT.

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

14

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

15 September 66

Deputy Chief of Station

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL:

I would have rated Subject employee about the same. During the period under review, I had the opportunity to follow this employee's activities closely and can attest to his professional and imaginative handling [redacted]. He corrected an earlier occupational fault [redacted] of a lack of cost consciousness, by cutting back on costs without adverse results to the operations concerned. During the one year under my observation, this employee performed highly satisfactorily.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

16 September 66

Chief of Station

/s/

SECRET

SECRET

- 2 -

SECTION C (CONTINUED)

thinking; he is perceptive and resourceful. He requires a minimum of guidance and direction. Subject showed some definite improvement with respect to cost consciousness and it is noteworthy that it did not adversely affect his enthusiasm. His operational and positive reports continue to be clear, concise and well written.

Summed up, Subject is a highly regarded professional officer who made a most worthwhile contribution to the overall mission.

SECRET

S-E-C-R-E-T
(when filled in)

MEMORANDUM FOR: Chief, Transactions & Records Branch/OP
FROM: Chief, External Training Branch/RS/TR
SUBJECT: Completion of External Training

27 DEC 1966

This is to advise you that [redacted] training
request # R-18762 attended [redacted] training program:

COURSE: NATIONAL INTERDEPARTMENTAL SEMINAR
INSTITUTION: DEPARTMENT OF STATE
DATE: 21 NOVEMBER - 16 DECEMBER 1966
GRADE: Successful Completion

FOR THE DIRECTOR OF TRAINING:

[redacted]

Attachments:

☐ Grade Report
☒ Certificate of Satisfactory/Successful Completion
☐ Certificate of Completion
☐ Roster of Participants
☐ Training Report by Institution
☐ Training Report by Student
☐ None
☐ Other: _____

GROUP I
excluded from automatic
downgrading and
declassification

S-E-C-R-E-T
(when filled in)

SECRET

(When Filled In)

FITNESS REPORT

EMPLOYER SERIAL NUMBER

SECTION A

GENERAL

1. NAME (Last) (First) (Middle) [REDACTED]		2. DATE OF BIRTH [REDACTED]	3. SEX M	4. GRADE GS-14	5. SD D
6. OFFICIAL POSITION TITLE Ops Officer		7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/4			
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		11. DATE REPORT DUE IN O.P. 31 May 1966			
12. REPORTING PERIOD (From - to) 13 July 1965 - 31 Mar 1966		13. SPECIAL (Specify): [REDACTED]			

SECTION B

PERFORMANCE EVALUATION

- W - ~~Weak~~ Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
- A - ~~Adequate~~ Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.
- P - ~~Proficient~~ Performance is more than satisfactory. Desired results are being produced in a proficient manner.
- S - ~~Strong~~ Performance is characterized by exceptional proficiency.
- O - ~~Outstanding~~ Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1

Operational and administrative management of [REDACTED]

RATING LETTER

S

SPECIFIC DUTY NO. 2

[REDACTED]

RATING LETTER

S

SPECIFIC DUTY NO. 3

[REDACTED]

RATING LETTER

P

SPECIFIC DUTY NO. 4

[REDACTED]

RATING LETTER

P

SPECIFIC DUTY NO. 5

Preparation of operational, contact and dissemination reports.

RATING LETTER

S

SPECIFIC DUTY NO. 6

Preparation of operational programs, projects and briefing papers

RATING LETTER

S

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and any other limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER

S

SECRET

(When Filled In)

SECTION C

QUALITATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject has been under the direct guidance and supervision of this rating officer for the nine-month period covered by this report.

Subject is well grounded in the knowledge and application of [redacted] techniques and he has amply demonstrated an ability for creative thinking. He is both imaginative and resourceful and he uses his extensive knowledge of the internal political scene and his fluency in Spanish to the best operational advantage. He has initiative and he is persistent in carrying things through to a conclusion. He has an excellent facility for written communication. His operational and positive reports are clear, concise and well presented. He requires a minimum of guidance and direction. He responds very well to supervision and he accepts comments, suggestions and criticism in the constructive light in which they are presented. As a supervisor he has been able to obtain satisfactory results.

Subject's only weakness is that he tends to be less cost conscious than is desirable and unless his activities are circumscribed he is apt to allow his fertile mind and enthusiasm to get out of hand.

Summed up, Subject is a highly professional and experienced officer who has all of the necessary operational and intellectual abilities to meet the requirements of the job.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 26 April 1966	SIGNATURE OF EMPLOYEE [redacted] /s/	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION Nine	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 26 April 1966	OFFICIAL TITLE OF SUPERVISOR Deputy Chief of Station	TYPED OR PRINTED NAME AND SIGNATURE [redacted] /s/
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I would have rated Subject officer approximately the same. In the past eight months that I have observed him in action, he has demonstrated an ability to get things done in a professional manner. He is, without doubt, the most professional and effective senior case officer at this Station. It was a pleasure to work with this officer and he will be sorely missed after his departure in August.		
DATE 27 April 1966	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station.	TYPED OR PRINTED NAME AND SIGNATURE [redacted] /s/

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A				GENERAL	
1. NAME (Last) (First) (Middle) <div style="background-color: black; width: 100px; height: 1em;"></div>		2. DATE OF BIRTH <div style="background-color: black; width: 100px; height: 1em;"></div>	3. SEX N	4. GRADE GS-14	5. PD D
6. OFFICIAL POSITION/TITLE Operations Officer		7. OFF/DIV/GR OF ASSIGNMENT DDP/WH/4		8. CURRENT STATION <div style="background-color: black; width: 100px; height: 1em;"></div>	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 August 1965		12. REPORTING PERIOD (From - to) 1 April 1965 - 12 July 1965			
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
SPECIFIC DUTY NO. 9					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
2 AUG 1965					S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position. Give in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</small></p> <p style="margin-top: 10px;">This report is submitted due to the reassignment of the supervisor. Subject's performance remains as before. The Rating Letter of Specific Duty No. 1 was lowered from "O" to "S" for the simple reason that the goal in large measure has been achieved, i.e., a substantial reduction in costs but with a concurrent improvement in the net product.</p> <div style="border: 1px solid black; height: 60px; width: 100%; margin-top: 10px;"></div>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
12 July 65	/s/		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
15			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
12 July 65	Operations Officer	/s/	
3. BY REVIEWING OFFICIAL			
<p><small>COMMENTS OF REVIEWING OFFICIAL</small></p> <p style="margin-top: 10px;">This officer's performance in the last three months has continued at a high level and I have nothing to add to the reviewing comments made in his last report.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
12 July 65	Chief of Station	/s/	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A		GENERAL			
1. NAME		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
			M	GS-14	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV. OR OF ASSIGNMENT		8. CURRENT ASSIGNMENT	
Ops. Officer		DDP/WV/L			
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
31 May 1965			1 April 1964 - 31 March 1965		
SECTION B PERFORMANCE EVALUATION					
W - Weak		Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
A - Adequate		Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.			
P - Proficient		Performance is more than satisfactory. Desired results are being produced in a proficient manner.			
S - Strong		Performance is characterized by exceptional proficiency.			
O - Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
					RATING LETTER
					O
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					S
					RATING LETTER
					P
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</small></p> <p>There is little change over the previous report. Subject remains eager and aggressive and his enthusiasm for his assignment has not been dulled by the everyday frustrations and difficulties of doing business and living [redacted] Subject's political action project</p> <div style="border: 1px solid black; height: 200px; width: 100%; margin-top: 10px;"></div>			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE 24 May 65	SIGNATURE OF EMPLOYEE [redacted] /		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 12	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE 24 May 65	OFFICIAL TITLE OF SUPERVISOR Operations Officer	TYPED OR PRINTED NAME AND SIGNATURE [redacted] /s/	
3. BY REVIEWING OFFICIAL			
<p><small>COMMENTS OF REVIEWING OFFICIAL</small></p> <p>From fairly close observation of his work I agree generally with ratings and comments of supervisor. The rating of "outstanding" on his work [redacted] was justified in his last report because of the exceptional job he had done in developing this relationship. While he has continued to maintain it at a high level, there is some question in my mind whether a rating of "outstanding" is still justified. He is definitely a strong and active officer, handling a heavy load of [redacted] operations. A well-rounded judgement of this officer should, however, include the statement that he sometimes rushes ahead a bit too precipitously and enthusiastically, and is inclined to gloss over [redacted] details which can be important. He is effective</p>			
DATE 24 May 65	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station	TYPED OR PRINTED NAME AND SIGNATURE [redacted] /s/	

SECRET

S E C R E T

SECTION C (Continued)

and direction but is quick to disagree if such be the case. However, he can be counted upon to implement fully a decision once one has been reached.

SECTION D.3. (Continued)

In his written work, more so than in his oral presentations which tend to be somewhat rambling. He is a cheerful and outgoing person who has learned Spanish exceptionally rapidly and well. He has developed a good understanding of, and rapport with, his contacts [redacted]
[redacted]

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A		GENERAL			
1. NAME <div style="background-color: black; width: 100px; height: 1em;"></div>		2. DATE OF BIRTH (M, D, Y)		4. GRADE GS-14	5. SD D
6. OFFICIAL POSITION TITLE Operations Officer		7. OFF/DIV/BR OF ASSIGNMENT DDP WHD 2		8. CURRENT ASSIGNMENT	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 May 1964		12. REPORTING PERIOD (From - to) 1 April 1963-31 March 1964			
SECTION B		PERFORMANCE EVALUATION			
W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - Strong Performance is characterized by exceptional proficiency. O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER <div style="border: 1px solid black; padding: 2px; text-align: center;">O</div> RATING LETTER <div style="border: 1px solid black; padding: 2px; text-align: center;">S</div> RATING LETTER <div style="border: 1px solid black; padding: 2px; text-align: center;">S</div> RATING LETTER <div style="border: 1px solid black; padding: 2px; text-align: center;">P</div> RATING LETTER <div style="border: 1px solid black; padding: 2px; text-align: center;">P</div> RATING LETTER
					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					<div style="border: 1px solid black; padding: 2px; text-align: center;">S</div>

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject remains the eager, aggressive, and intelligent individual described in his last Fitness Report. During the year under review

is good and his formal reporting to both his supervisor and Headquarters is kept current and done in depth.

Subject's project management

This officer has consistently shown a cost consciousness during the period he has been at this Station (24 months). In addition he has an ability to relate cost to production which has resulted in almost halving funds spent

Subject's language competence (Spanish) is sufficiently fluent

--continued--

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

DATE

22 May 1964

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

20

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

22 May 1964

OFFICIAL TITLE OF SUPERVISOR

Operations Officer

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I generally concur with the Supervisor's ratings on Subject and on his general comments. In direct dealings with this officer I find him an aggressive and well-rounded officer who carries a full load of projects. He is making a significant contribution to the Station's mission.

DATE

22 May 1964

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/

SECRET

Continuation of Section C, Fitness Report, attachment
[redacted] 22 May 1964

Subject's rapport [redacted]
[redacted] appears to be excellent, which is doubtless
an important element in his continuing success with his
projects. Subject is responsive to guidance and
direction and when after full discussion a course of
action is agreed upon, he can be counted upon to take
action within the agreed limits.

SECRET
(When Filled In)

GA

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A 1. NAME <div style="border: 1px solid black; height: 1.2em; width: 100%;"></div>		GENERAL 2. SEX: Male 3. GRADE: OS-14 4. SD: D 5. OFF/DIV/BR OF ASSIGNMENT: DDP WH. 2 6. CURRENT STATION: <div style="border: 1px solid black; height: 1.2em; width: 100%;"></div>			
7. OFFICIAL POSITION TITLE Ops Officer		8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			
9. DATE REPORT DUE IN O.P. 31 May 1963		10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> ANNUAL SPECIAL (Specify): 11. REPORTING PERIOD (From - to): 5 June 1962 - 31 March 1963			
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>					
1		RATING LETTER		S	
2		RATING LETTER		O	
3		RATING LETTER		S	
4		RATING LETTER		P	
5		RATING LETTER		P	
6		RATING LETTER			
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					RATING LETTER <div style="border: 1px solid black; width: 20px; height: 20px; line-height: 20px; margin: 0 auto;">S</div>

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training, comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject is an aggressive, eager, and intelligent person who knows how to do his job.

Also, during this period Subject

Subject's language competence (Spanish) is proficient; he is able to converse meaningfully in Spanish with persons [redacted] who have no English.

(continued on separate sheet)

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
24 May 1963	/S/ [redacted]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYER, GIVE EXPLANATION	
Eight		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
24 May 1963	Operations Officer	/S/ [redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
<p>I am in general agreement with the supervisor's assessment of this individual, whom I have seen fairly frequently. He is extremely active and aggressive and has moved ahead rapidly into new activities [redacted]</p> <div style="border: 1px solid black; height: 50px; width: 100%; margin-top: 10px;"></div>		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
24 May 1963	Chief of Station	/S/ [redacted]

SECRET

Continuation of Section C, Fitness Report, attachment

24 May 1963

Subject has no important weaknesses. His aggressiveness and eagerness have at times led to hasty action that might have resulted in professionally embarrassing results. On the other hand, [redacted] Subject is responsive to guidance and direction. He reports fully and within time limits. Subject's rapport with those with whom he is in professional contact appears excellent.

SECRET
When Filled In

FITNESS REPORT

EMPLOYEE SERIAL NUMBER

SECTION A

GENERAL

1. NAME Last First Middle			2. DATE OF BIRTH		3. SEX Male		4. GRADE GS-13		
5. SERVICE DESIGNATION D			6. OFFICIAL POSITION TITLE Operations Officer		7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/1				
8. CARRIER STAFF STATUS					9. TYPE OF REPORT				
<input type="checkbox"/> NOT ELIGIBLE		<input type="checkbox"/> MEMBER		<input type="checkbox"/> DEFERRED		<input type="checkbox"/> INITIAL		<input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR	
<input type="checkbox"/> PENDING		<input type="checkbox"/> DECLINED		<input type="checkbox"/> DENIED		<input type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.P.					11. REPORTING PERIOD From 1 Jan 62 to 30 Apr 62 To				
					12. SPECIAL (Specify)				

SECTION B.	EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES
------------	--

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider **ONLY** effectiveness in performance of that duty. All employees with supervisory responsibilities **MUST** be rated on their ability to supervise (indicate number of employees supervised).

1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
		RATING NO. 5 10/70				RATING NO. 5
		RATING NO. 5				RATING NO. 6
		RATING NO. 5 B, S. J. B. 90 agencies.	SPECIFIC DUTY NO. 8			RATING NO.

SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position: performance of specific duties, productivity, conduct on job, employee's progress, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

1. Performance in many important respects fails to meet requirements.	RATING NO. 5
2. Performance meets most requirements but is deficient in one or more important respects.	
3. Performance clearly meets basic requirements.	
4. Performance clearly exceeds basic requirements.	
5. Performance in every important respect is superior.	
6. Performance in every respect is outstanding.	

SECTION NO.	DESCRIPTION OF THE EMPLOYEE
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In the rolling boxes below, check (X) the degree to which each characteristic applies to the employee

1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree					
CHARACTERISTICS			NOT APPL- CABLE	NOT US- SERVED	RATING				
					1	2	3	4	5
GETS THINGS DONE								X	
RESOURCEFUL								X	
ACCEPTS RESPONSIBILITIES								X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X	
DOES HIS JOB WITHOUT BEING SUPERVISED								X	
FACILITATES WORKING OF A DIVISION OF HIS OFFICE									X
WRITES EFFECTIVELY								X	
SECURITY CONSCIOUS							X		
THINKS CLEARLY									X
DISCIPLINE IN ORGANIZING, MAINTAINING AND DISPOSING OF RECORDS							X		
OTHER FACTORS									

SEE SECTION "P" ON REVERSE SIDE

SEE SECTION "E" ON REVERSE SIDE

SECRET

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

State strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE: _____ SIGNATURE OF EMPLOYEE: _____

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: _____ IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION: _____

Four months

Subject departed on overseas assignment.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON: _____

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS: _____

REPORT MADE WITHIN LAST 90 DAYS: _____

OTHER (SPECIFY): _____

DATE: 8 June 1962 OFFICIAL TITLE OF SUPERVISOR: AC/EE/1 TYPED: [Signature] SIGNATURE: _____

3. BY REVIEWING OFFICIAL

I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. _____

I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. _____

I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. _____

I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE. _____

COMMENTS OF REVIEWING OFFICIAL: _____

DATE: _____ OFFICIAL TITLE OF REVIEWING OFFICIAL: _____ TYPED OR PRINTED NAME AND SIGNATURE: _____

SECRET

SECRET
(When Filled In)

FITNESS REPORT		B. HELDOUT		LOTER SERIAL NUMBER																																																																			
SECTION A 1. GRADE, DUTY ASSIGNMENT, AND REPORTING PERIOD 2. NAME 3. GRADE 4. DUTY ASSIGNMENT 5. REPORTING PERIOD 6. OPERATIONS OFFICER 7. TYPE OF REPORT 8. DATE REPORT DUE IN O.P. 9. REPORTING PERIOD 10. SPECIAL (Specify)																																																																							
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SECRET

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

This employee was new to WH and served only about three months under the supervision of the undersigned. He brought wide experience and background in CA work to the Branch due to his past experience in other components of KUBARK.

His performance was excellent and can be expected to improve with more familiarization with the area.

SECTION F

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE

4 April 1962

SIGNATURE

2.

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THE REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

26 March 1962

OFFICIAL TITLE OF SUPERVISOR

C/WH/1

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

☐ I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

☒ I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

☐ I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

☐ I CANNOT JUDGE THESE EVALUATIONS; I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL:

During the period from the rating officer's departure in Oct 1961 until [redacted] was reassigned to another Branch in Feb 1962 in preparation for an overseas assignment, he demonstrated high competence in all of his duties, thereby confirming the rating officer's expectations in the last sentence of Section E. On the basis of this fine performance, I would upgrade the rating in Section C from 4 to 5.

DATE

4 April 1962

OFFICIAL TITLE OF REVIEWING OFFICIAL

AC/WH/1

TT

SIGNATURE

SECRET

3-E-C-R-2-T
(When filled in)

TRAINING REPORT

Spanish Basic Reading, Speaking, Writing I
Hours, part time

100, 16 January 1961 - 24 March 1961 6 students

Student :

Year of Birth:

SD Date:

September 1961

Grade:

GS-13

Office :

COURSE OBJECTIVES - CONTENT AND METHODS

This is the first phase in a three-phase basic sequence of 30 weeks, each phase lasting 10 weeks.

The general aim of the course is to enable the student to use the spoken language with moderate facility and accuracy in a large number of everyday situations while providing a basis for further learning of the language either by actual use in the area or by further formal study. The three major objectives of this phase of the course are to develop an ability: (1) to adequately distinguish and pronounce the sounds of the language; (2) to use appropriately a small quantity of Spanish sentences and expressions; (3) to comprehend normal-speed spoken Spanish in a limited number of everyday, non-technical situations.

Classes are held 2 hours per day, 5 days a week, requiring a minimum of 10 hours of preparation per week. To receive the maximum benefit from this course each student should plan to devote at least two-thirds of the class preparation time doing drill in the language laboratory.

ACHIEVEMENT RECORD

Student progress is evaluated primarily on oral recitation in the form of drills and free conversation based on memorized material. In addition, several tests are given during the course. This student's rating is indicated by the asterisk.

Unsatisfactory

Satisfactory

Excellent

Incomplete

3 0

3

It is regrettable that will not be able to continue in the course at this time but increased office duties do not permit it. had made a very profitable start in Spanish in this course.

FOR THE DIRECTOR OF TRAINING:

/s/

22 May 1961

1010

3-E-C-R-2-T
(When filled in)

CONFIDENTIAL
(When Filled In)

FOREIGN LANGUAGE APTITUDE AND EXPERIENCE REPORT

DATE OF TESTING

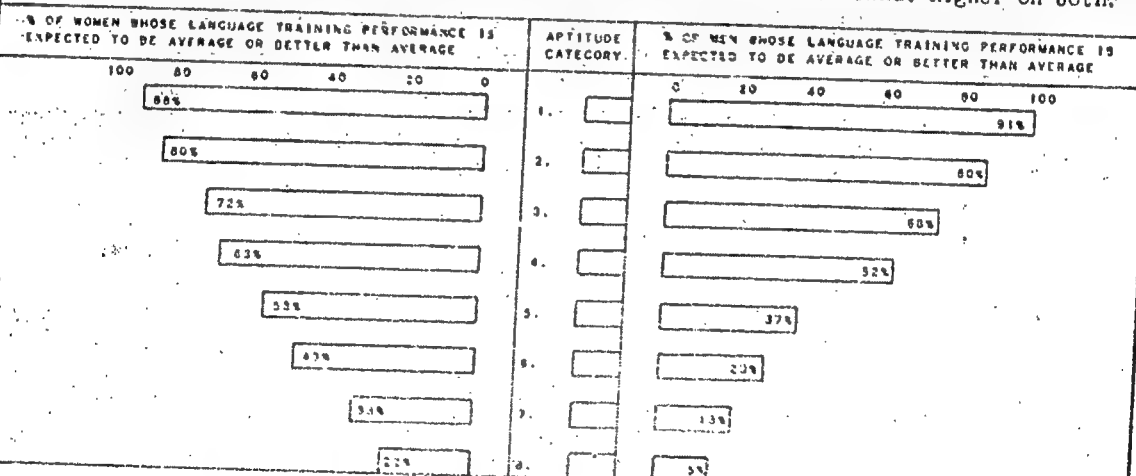
NAME

OFFICE

MALE

FEMALE

The category checked below is an interpretation of the scores made by the person named above on a battery of foreign language aptitude tests. The relationships between test performance and subsequent training performance of trainees in Agency language training courses are indicated by the graphs next to the aptitude categories. The graphs to the left are for women and the graphs to the right are for men. From these graphs you can read for each aptitude category the probability that a person in that category will perform in an Agency foreign language training course at an average or better-than-average level. For example, 22 percent of the women who obtain an aptitude rating of "8" can be expected to be average or better in course performance, while 5 percent of the men with ratings of "8" can be expected to be average or better in course performance. A man needs an aptitude rating of "6" to have about the same expectation of success in language training as a woman with a rating of "8." At the other end of the scale, 80 percent of either men or women who obtain aptitude ratings of "2" can be expected to do average or better-than-average work in training. The differences in relationship are due to differences between men and women in both training performance and test scores. On the average women are somewhat higher on both.



Since many things other than aptitudes enter into the determination of training course performance, in any class of students there will usually be some whose performance will be better than would be expected from their test scores, just as there will likely be some whose performance is poorer than expected. STRENGTH OF MOTIVATION, PRIOR EXPERIENCE WITH A FOREIGN LANGUAGE, and other factors should be considered in selecting people for language training and in interpreting language training results. For example, the number of languages previously studied or learned and the amount of academic and nonacademic language-learning experience are factors not measured by the tests but are indicative of probable success in learning a foreign language. Whether such experience was in the same language as the one to be studied or in a different one is, of course, an additional relevant factor.

NUMBER OF FOREIGN LANGUAGES STUDIED OR LEARNED BY THIS INDIVIDUAL

MOVING OF ACADEMIC TRAINING			NONACADEMIC EXPERIENCE (12 MONTHS OR MORE)	
HIGH SCHOOL	COLLEGE	OTHER	READING OR LISTENING	SPEAKING
15	12	1	1	1

DATE

SIGNATURE OF CHIEF, U.S. STAFF

NOTE: This report may be shown to the individual concerned.

FORM 1674

CONFIDENTIAL

(41)

SECRET
(When Filled In)

30 JAN 1961 FITNESS REPORT				EMPLOYER SERIAL NUMBER											
SECTION A				GENERAL											
1. NAME (Last) <u> </u> (First) <u> </u> (Middle) <u> </u>				3. SEX M	4. GRADE GS-13										
5. SERVICE DESIGNATION D 6. OFFICIAL POSITION TITLE Ops Officer				7. OFF/DIV/RR OF ASSIGNMENT DDP/CA/ 											
8. CAREER STAFF STATUS				9. TYPE OF REPORT											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>NOT ELIGIBLE</td> <td><input checked="" type="checkbox"/> MEMBER</td> <td>DEFERRED</td> </tr> <tr> <td>PENDING</td> <td>DECLINED</td> <td>DENIED</td> </tr> </table>				NOT ELIGIBLE	<input checked="" type="checkbox"/> MEMBER	DEFERRED	PENDING	DECLINED	DENIED	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>INITIAL</td> <td>REASSIGNMENT/SUPERVISOR</td> </tr> <tr> <td><input checked="" type="checkbox"/> ANNUAL</td> <td>REASSIGNMENT/EMPLOYEE</td> </tr> </table>		INITIAL	REASSIGNMENT/SUPERVISOR	<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT/EMPLOYEE
NOT ELIGIBLE	<input checked="" type="checkbox"/> MEMBER	DEFERRED													
PENDING	DECLINED	DENIED													
INITIAL	REASSIGNMENT/SUPERVISOR														
<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT/EMPLOYEE														
10. DATE REPORT DUE IN O.P. 31 January 1961				11. REPORTING PERIOD From 25 May 60 - To 31 Dec. 60											
SECTION B															
EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES															
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>1 - Unsatisfactory</td> <td>2 - Barely adequate</td> <td>3 - Acceptable</td> <td>4 - Good</td> <td>5 - Outstanding</td> </tr> </table>						1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Good	5 - Outstanding					
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Good	5 - Outstanding											
<div style="float: right; text-align: right; padding-right: 10px;"> Rating No. 5 Rating No. 5/6 Rating No. </div>															
SECTION C															
EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION															
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations of talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>1 - Performance in many important respects fails to meet requirements.</td> <td rowspan="5" style="text-align: center; vertical-align: middle;"> Rating No. 5/6 </td> </tr> <tr> <td>2 - Performance meets most requirements but is deficient in one or more important respects.</td> </tr> <tr> <td>3 - Performance clearly meets basic requirements.</td> </tr> <tr> <td>4 - Performance clearly exceeds basic requirements.</td> </tr> <tr> <td>5 - Performance in every important respect is superior.</td> </tr> <tr> <td>6 - Performance in every respect is outstanding.</td> <td></td> </tr> </table>						1 - Performance in many important respects fails to meet requirements.	Rating No. 5/6	2 - Performance meets most requirements but is deficient in one or more important respects.	3 - Performance clearly meets basic requirements.	4 - Performance clearly exceeds basic requirements.	5 - Performance in every important respect is superior.	6 - Performance in every respect is outstanding.			
1 - Performance in many important respects fails to meet requirements.	Rating No. 5/6														
2 - Performance meets most requirements but is deficient in one or more important respects.															
3 - Performance clearly meets basic requirements.															
4 - Performance clearly exceeds basic requirements.															
5 - Performance in every important respect is superior.															
6 - Performance in every respect is outstanding.															
SECTION D															
DESCRIPTION OF THE EMPLOYEE															
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee															
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree											
CHARACTERISTICS			NOT APPLICABLE	NOT OBSERVED	RATING										
					1 2 3 4 5										
GETS THINGS DONE					X										
RESOURCEFUL					X										
ACCEPTS RESPONSIBILITIES					X										
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES					X										
DOES HIS JOB WITHOUT NEEDING SUPPORT					X										
FACILITATES SMOOTH OPERATION OF HIS OFFICE					X										
WORKS EFFECTIVELY					X										
SECURITY CONSCIOUS					X										
THINKS CLEARLY					X										
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS					X										
OTHER (Specify):															

SECRET

(When Filled In)

OFFICE OF PERSONNEL

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

State strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to justify the basis for determining future personnel actions.

JAN 27 2 21 PM '61

(which, on several occasions has indicated a strong interest in securing his services when his release from the staff can be arranged). Assignments are completed with dispatch and in good order.

and differently tailored for each.
During the absence of the rating official [] has acted as Branch Chief.

SECTION F

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I certify that I

this Report.

DATE

23 January 1961

SIGNATURE

2.

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

23 January 1961

OFFICIAL TITLE OF SUPERVISOR

CA/

TYPED OR PRINTED NAME AND SIGNATURE

3.

I COULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

I COULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

I COULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

CA/C/PROP

TYPED OR PRINTED NAME AND SIGNATURE

HENRY C. SUTTON

SECRET

SECRET
(When Filled In)

4 Apr 60 63-115
13-27
22

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 15					
SECTION A 63-115-8-27 GENERAL											
1. NAME (Last) (First) (Middle)				2. DATE OF BIRTH		3. SEX					
						M					
4. SERVICE DESIGNATION		5. OFFICIAL POSITION TITLE		6. OFF/DIV/BR OF ASSIGNMENT							
M		Asst. Chief		FBI/DOJ							
7. CAREER STAFF STATUS				8. TYPE OF REPORT							
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> INITIAL				<input type="checkbox"/> REASSIGNMENT/SUPERVISOR							
<input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED <input type="checkbox"/> ANNUAL				<input checked="" type="checkbox"/> REASSIGNMENT/EMPLOYEE							
9. DATE REPORT DUE IN O.P.				10. REPORTING PERIOD							
				1 Nov 59 30 Mar 60							
				SPECIAL (Specify)							
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES											
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).											
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding											
SPECIFIC DUTY NO. 1				RATING NO.		SPECIFIC DUTY NO. 4					
Operations officer, political action				6		Assisting in political action planning					
SPECIFIC DUTY NO. 2				RATING NO.		SPECIFIC DUTY NO. 5					
Collection and processing of intelligence				4							
SPECIFIC DUTY NO. 3				RATING NO.		SPECIFIC DUTY NO. 6					
Origination of correspondence				5							
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION											
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.											
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.						RATING NO. 4/5					
SECTION D DESCRIPTION OF THE EMPLOYEE											
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee											
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree		5 - Outstanding degree			
CHARACTERISTICS					NOT APPLICABLE	NOT OBSERVED	RATING				
							1	2	3	4	5
GETS THINGS DONE										X	
RESOURCEFUL										X	
ACCEPTS RESPONSIBILITIES										X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES										X	
DOES HIS JOB WITHOUT STRONG SUPPORT										X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE										X	
WRITES EFFECTIVELY										X	
SECURITY CONSCIOUS									X		
THINKS CLEARLY									X		
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS										X	
OTHER (Specify)											

SECRET

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Subject is an exceptionally able political action officer. His capacity for grasping a rapidly developing political situation quickly and for making on-the-spot decisions is quite unique, and he would be a powerful addition to any [redacted] He is not always able to separate the significant from the insignificant and therefore tends to over-report. He is also inclined to operate more as a singleton than as an integrated member of [redacted] team. He has been quite successful in [redacted] Additional training does not appear necessary at this time.

In preparing this report, careful consideration was given to the guidance [redacted] which recognizes the principle of rating the individual against the group, and establishes an "average" rating as being an entirely satisfactory performance. The supervisor, however, considers this fitness report to be in keeping with that guidance.

This report has been prepared in accordance with [redacted] Division standards which recognize [redacted] the individual against the group. Thus an "average" rating reflects an entirely satisfactory performance.

SECTION F

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE	SIGNATURE OF EMPLOYEE	
	/s/ [redacted]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify)		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
30 March 1960		/s/ [redacted]
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/>	I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.	
<input type="checkbox"/>	I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.	
<input type="checkbox"/>	I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.	
<input type="checkbox"/>	I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.	
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
30 March 1960		/s/ [redacted]

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER					
SECTION A GENERAL											
1. NAME		2. DATE OF BIRTH		3. BOX		4. GRADE					
				M		09-13					
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT							
DP		OPS Officer									
8. CAREER STAFF STATUS				9. TYPE OF REPORT							
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED				<input checked="" type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE							
10. DATE REPORT DUE IN O.P.				11. REPORTING PERIOD							
				From <u>Sept 1958</u> To <u>31 Oct 1959</u> SPECIAL (Specify) <u>Promotion</u>							
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES											
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).											
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding											
RATING NO.		SPECIFIC DUTY NO. 1				RATING NO.					
5						5					
RATING NO.		SPECIFIC DUTY NO. 2				RATING NO.					
6		Acts as Deputy Chief, PP				5					
RATING NO.		SPECIFIC DUTY NO. 3				RATING NO.					
5		Deputy				4					
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION											
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.											
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.							RATING NO. 4/5				
SECTION D DESCRIPTION OF THE EMPLOYEE											
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee											
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree		5 - Outstanding degree			
CHARACTERISTICS					NOT APPLICABLE	NOT OBSERVED	RATING				
							1	2	3	4	5
GETS THINGS DONE											X
RESOURCEFUL										X	
ACCEPTS RESPONSIBILITIES											X
CAN MAKE DECISION ON HIS OWN WHEN NEED ARISES										X	
DOES HIS JOB WITHOUT STRONG SUPPORT											X
FACILITATES SMOOTH OPERATION OF HIS OFFICE										X	
WRITES EFFECTIVELY										X	
SECURITY CONSCIOUS								X			
THINKS CLEARLY										X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS											
OTHER (Specify):											

SEE SECTION "E" ON REVERSE SIDE

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

State strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the basis for determining future personnel actions.

Subject has a well developed background [redacted]
He has continually demonstrated initiative and imagination in obtaining the maximum production from his projects, [redacted]

No particular weaknesses were observed. Subject is well qualified for senior operational assignments [redacted] and is recommended for promotion. Since subject is planning to return for a second tour, no additional training is recommended at this time.

In preparing this report, careful consideration was given to the guidance [redacted] which recognizes the principle of rating the individual against the group, and establishes an "average" rating as being an entirely satisfactory performance. The supervisor, however, considers this fitness report to be in keeping with that guidance in that subject has clearly demonstrated a high degree of operational capability as indicated herein.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE 5 November 1959 SIGNATURE OF EMPLOYEE [redacted]

2. BY SUPERVISOR

MONTHS EMPLOYER HAS BEEN UNDER MY SUPERVISION IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

21 months

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 30 DAYS

REPORT MADE WITHIN LAST 30 DAYS

OTHER (Specify):

DATE 5 November 1959 OFFICIAL TITLE OF SUPERVISOR C/PP TYPED OR PRINTED NAME AND SIGNATURE [redacted]

3. BY REVIEWING OFFICIAL

- ☒ I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
- ☐ I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
- ☐ I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
- ☐ I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE 9 November 1959 OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station TYPED OR PRINTED NAME AND SIGNATURE [redacted]

SECRET

SECRET

9 November 1959

COMMENT OF REVIEWING OFFICIAL:

[redacted] I have carefully reviewed this Fitness Report in order to comply with division policy of avoiding overrating. We are satisfied that [redacted] who has been given a high rating with respect to specific performance characteristics, fully merits such rating. During the fourteen years I have been with the Agency, I have had the opportunity to observe personally a good number of [redacted] officers. Additionally, I have worked closely with [redacted]. I have no hesitation in stating that I regard him as an unusually qualified officer for [redacted]. I believe also that he should be promoted as soon as practicable from GS-13 to GS-14.

[redacted]

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section 'A' below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX M	4. SERVICE DESIGNATION DP
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE Ops Officer-- Deputy Chief , (PP)	
7. GRADE GS-13	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 15 March-15 September 1958	
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	REASSIGNMENT-SUPERVISOR REASSIGNMENT-EMPLOYEE	SPECIAL (Specify)

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" IN CI OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

U. THIS DATE 5 Nov 58 C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR William T. Tarrant D. SUPERVISOR'S OFFICIAL TITLE Chief, PP

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
Posted Pcs. Control	17 DEC 1958
BY	DATE
BY	DEC 18 1958

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

1. THIS DATE 5 Nov 58 B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL C. OFFICIAL TITLE OF REVIEWING OFFICIAL COB

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

5
INSERT
RATING
NUMBER

1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS: Subject has proven himself to be an effective and productive case officer.

FORM NO. 45 (Part I)
1 NOV 55

REPLACES PREVIOUS EDITIONS
OF FORMS 45 AND 45A WHICH
ARE OBSOLETE.

SECRET

Performance

(4)

SECRET

(When Filled In)

1. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES		OFFICE OF PERSONNEL																									
DIRECTIONS: a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties. b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty. c. For supervisors, ability to supervise will always be rated as a specific duty by supervisors those who supervise a secretary only. d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility. e. Two individuals with the same job title may be performing different duties. If so, rate then on different duties. f. Be specific. Examples of the kind of duties that might be rated are: <table style="width:100%; font-size: small;"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES																									
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
g. For some jobs, duties may be broken down even further if supervisor considers it advisable. e.g., combined key and phone operation, in the case of a radio operator.																											
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SECRET

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2 DEC RECD

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the HQ no later than 30 days after the due date indicated in item 4 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Middle)	2. GRADE	3. SER	4. SERVICE DESIGNATION
		H	EE DP
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
		Ops Officer-Deputy Chief, (PP)	
7. GRADE	8. DATE REPORT DUE IN QP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-13		15 March-15 September 1950	
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	<input type="checkbox"/> SPECIAL (Specify)
	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
5 Nov 1950		Chief, PP
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
5 Nov 1950		COI

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

5	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion as to the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, rate your rating in the "actual" column. If based on opinion of his potential, rate the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	1 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
	2 - BELIEVE INDIVIDUAL WOULD BE A DEAN SUPERVISOR IN THIS KIND OF SITUATION	
	3 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
	4 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (such as clerks, stenographers, technicians or professional specialists of various kinds) whose contact with immediate superiors is frequent (First line supervisor)
	2	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	3	A GROUP, AND MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
	2	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE EXECUTIVE STAFF
		Other (Specify)

SECRET

Potential

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
6 months

4. COMMENTS CONCERNING POTENTIAL
Qualified as senior case officer

OFFICE OF PERSONNEL
25TH '58
MAIL ROOM

SECTION H. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
Continue with present duties for time being.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS
Subject and family well adapted to overseas duties

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

CATEGORY NUMBER

1. HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
 2. APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 3. APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 4. APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 5. APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 6. APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	3	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN HELP AWAYED	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITY FULLY	4	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
3	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. REMAINS WELL IN SUBORDINATION	4	25. DISPLAYS JUDGMENT
3	6. KNOWS WHEN TO SEEK ASSISTANCE	4	16. DOES HIS JOB WITHOUT STANDING SUPPORT	4	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBEDIENT	4	28. HAS CRITICISM AS CONSTRUCTIVE
4	9. GETS THINGS DONE	4	19. THINKS CLEARLY	4	29. FACILITATES ANOTHER'S OPERATION OF HIS OFFICE
4	10. CAN COPE WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	4	30. DOES NOT RESOLVE STRESS AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

6 JUN 1958

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisors and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	DP
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
		Ops Officer--Deputy Chief, (PP)	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-13	Special	15 March-15 May 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	X Promotion action

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

X THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "E" IN CI OR D, A WARNING LETTER WAS SENT TO HIM A COPY ATTACHED TO THIS REPORT.
THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

D. THIS DATE 19 May 1958 C. TYPE NATURE OF SUPERVISOR D. SUPERVISOR'S OFFICIAL TITLE Chief, PP

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
Posted For Control	13 JUL 1958
Reviewed by PUD	7/24/58

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 19 May 1958 B. TYPED OR PR OFFICIAL C. OFFICIAL TITLE OF REVIEWING OFFICIAL COS

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

5	1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
	2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
INCENT RATING NUMBER	6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS: Subject has proven himself to be an effective and productive case officer.

SECRET

OFFICE OF PERSONNEL

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERVIEWS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>INTERVIEWING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPIST</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERVIEWS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	INTERVIEWING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPIST	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
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[Redacted]		5	[Redacted]																								
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<p>IS THIS INDIVIDUAL BETTER SUITED FOR SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p> <p>Well qualified for most operational assignments [Redacted]</p>																											

SECRET

SECRET

(When Filled In)

JUN 1958

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FIVE AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OI no later than 30 days after the due date indicated in Item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
		M	DP
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
		Ops Officer-Deputy Chief, (PP)	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-13	Special	15 March - 15 May 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
			Promotion action

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
19 May 1958		Chief, PP
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
19 May 1958		COB

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

5 RATING NUMBER	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT AHEAD MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
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2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: does this person have the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUIABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DISCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A BEAR SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
3		A GROUP DOING THE BASIC JOB (GROUP DELIVER, REPAIRSMEN, TECHNICIANS OR PROFESSIONAL SPECIALISTS of various kinds) where contact with immediate subordinates is frequent (First line supervisor)		
	2	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
	3	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, COORDINATING AND POLICE (Executive level)		
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
	2	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		Other (Specify)		

SECRET

Potential

SECRET

OFFICE OF PERSONNEL

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION

Two months

JUN 26 2 03 PM '58

2. COMMENTS CONCERNING POTENTIAL

Qualified as senior case officer

SECTION II.

FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Continue with present duties for time being.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

Subject and family well adapted to overseas duties.

SECTION I.

DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY NUMBER

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO GET ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	3	21. IS EFFECTIVE IN DISCUSSING WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NECESSARY	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTICAL IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
3	5. STRIVES CONSCIENTIOUSLY FOR HIS KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUSTICE
3	6. KNOWS WHEN TO ASK FOR ASSISTANCE	4	16. DOES HIS JOB WITHOUT STRONG DISLIKE	4	26. IS SECURITY CONSCIOUS
4	7. GETS ON WELL WITH PEOPLE	4	17. LOOKS UP WITH RESPECT TO PERSONS	4	27. IS JERARCHEL
4	8. GETS WORK DONE FAST	4	18. IS RESPONSIBLE	4	28. HAS CONTROL IN CONVERSATION
4	9. GETS THINGS DONE	4	19. THINKS CAREFULLY	4	29. PARTICIPATES IN GROUPS OF HIS OFFICE
4	10. CAN GET ON WITH OTHERS	4	20. CONSIDERS CHALLENGES WITHIN REASONABLE LIMITS	4	30. DOES NOT ABUSE SUPERIOR AND SUBORDINATE AUTHORITY

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section "A" below.

SECTION A.

GENERAL

1. NAME <div></div>	2. DATE OF BIRTH <div></div>	3. SEX M	4. SERVICE DESIGNATION SD:DP
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP FB 5		6. OFFICIAL POSITION TITLE Area Ops Officer, ADBr. Ch.	
7. GRADE GS-13	8. DATE REPORT DUE IN OF <div></div>	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 2 December 1956 - 2 August 1957	
10. TYPE OF REPORT (Check one) <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE	SPECIAL (Specify) <div></div>	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

A. CHECK (X) APPROPRIATE STATEMENT(S):

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	<input type="checkbox"/> IF INDIVIDUAL IS RATED "IN" CI OR D, A WARNING LETTER WAS SENT TO HIM & COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERISORS.	<input type="checkbox"/> I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify): <div></div>
<input type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE 2 August 1957	C. <div></div>	D. SUPERVISOR'S OFFICIAL TITLE Chief, FB/5
--------------------------------------	----------------	--

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE **23 AUG 1957**
 Posted Pos. Control
 Reviewed by CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section:

A. THIS DATE 9 AUG 1957	B. TYPED BY OFFICIAL <div></div>	C. OFFICIAL TITLE OF REVIEWING OFFICIAL CSE
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SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DISPOSITIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

<div>5</div> INSERT RATING NUMBER	1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
	2. BARELY ADEQUATE IN PERFORMANCE, ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING. HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the more important duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
 - Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
 - For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
 - Compare in your mind, when possible, the individual performing the same duty at a similar level of responsibility.
 - Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
 - Be specific. Examples of the kind of duties that might be rated are:

GENERAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TELEPHONING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
- For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

- | | | |
|---------------------------|---|--|
| DESCRIPTIVE RATING NUMBER | 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY | 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS |
| | 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY | 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
| | 3 - PERFORMS THIS DUTY ACCEPTABLY | |
| | 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER | |
| | 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | |

SPECIFIC DUTY NO. 1 Supervision, as Deputy Chief of Branch	RATING NUMBER 5	SPECIFIC DUTY NO. 4 Operational and administrative planning	RATING NUMBER 5
SPECIFIC DUTY NO. 2 Prepares cables and dispatches	RATING NUMBER 5	SPECIFIC DUTY NO. 5 Coordination of branch activities	RATING NUMBER 5
SPECIFIC DUTY NO. 3 Oral briefings	RATING NUMBER 5	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

Subject is capable, conscientious, and energetic. He gets along well with associates and is a good supervisor. His scholarly knowledge of political science and history, coupled with an ability to express himself well is a distinct asset. Has a slight tendency to lecture his listeners, and is sometimes carried away by the momentum of his own initiative and aggressive approach to problems but of course these characteristics can easily be qualities rather than faults when recognized and guided.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

- | | |
|--------------------|--|
| 5
RATING NUMBER | 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED |
| | 2 - OF DOUBTFUL SUITABILITY - WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW |
| | 3 - A BARELY ACCEPTABLE EMPLOYEE - BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION |
| | 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION |
| | 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS |
| | 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION |
| | 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION |

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ YES ☒ NO. IF YES, EXPLAIN FULLY:

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CI no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME	2. GRADE	3. SEX	4. SERVICE DESIGNATION
	OS-13	M	SD:DP
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
DDP FE 5		Area Ops Officer, ADBr.Ch.	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
OS-13		2 December 1956 - 2 August 1957	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	ANNUAL	REASSIGNMENT-EMPLOYEE	
	<input type="checkbox"/>	<input type="checkbox"/>	

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
2 August 1957		Chief, FE/S
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
9 AUG 1957		CPE

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

1. ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	6.7	DATE
2. HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED		
3. MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES		
4. READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES		
5. WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING		
6. ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT PRESENT LEVEL		
7. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSIGNMENT TO A HIGHER LEVEL RESPONSIBILITIES		

RATING NUMBER: 4

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
1	BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
2	BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
3	BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION

ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (First line supervisors, stenographers, technicians or professional specialists of various kinds), where contact with immediate subordinates is frequent (First line supervisor)
	2	A GROUP OF SUPERVISORS WHO DO THE BASIC JOB (Second line supervisors)
	2	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHO IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
	3	WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		Other (Specify)

SECRET

(When Filled In)

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
9 months

2. COMMENTS CONCERNING POTENTIAL
 Subject has many qualities which as he acquires experience and maturity, will make him increasingly valuable as a supervisor, operator, and high level case officer.

MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Management training might be useful.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

Has well-balanced attitude toward his work and his associates.

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER

1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
5	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS RE-OPPOSED BY OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	4	23. IS THOUGHTFUL OF OTHERS
3	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGEMENT
3	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. GIVES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
4	9. GETS THINGS DONE	4	19. THINKS CLEARLY	4	29. FACILITATES EFFECTIVE OPERATION OF HIS OFFICE
4	10. CAN cope WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ESTABLISHED TIME LIMITS	4	30. DOES NOT BELIEVE IN "GOOD AND BAD" PEOPLE

SECRET

TRAINING EVALUATION

COUNTERESPIONAGE OPERATIONS COURSE NO. 16

NAME [REDACTED]	SEX Male	DATE OF COURSE 25 Nov - 13 Dec 1957	NO. OF STUDENTS 15
DATE OF PRINT [REDACTED]	ISS DATE 17 Sept 1957	GRADE OR RANK GS-13	OFFICE DDP FR
PRESENTED ASSIGNMENT OR PRESENT POSITION Deputy Chief of FR/S.			

- I. Course Objectives: to familiarize the student with the various types of CE operations and with methods and procedures peculiar to CE in the field and at headquarters, to outline CE objectives, and to increase proficiency in the recognition and exploitation of leads.
- II. Course Characteristics: The Counterespionage Operations Course is of three weeks duration. The curriculum material is presented by means of lectures, seminars, and directed reading. It is divided into sections as follows:
 - A. Introduction (definition of terms, the CI Staff, operational security and risk assessment, sources of CE leads, CI reporting and records, documentation)
 - B. Interrogation
 - C. Foreign Intelligence Services (with emphasis on currently hostile services)
 - D. Penetration and Defection
 - E. Double Agent Operations

During the course each student is required to present orally a CI case and to submit a written version of the case. Evaluations are based on problems, written exercises requiring analyses of assigned case studies, the case analyses presented by the student, and on objective tests.

S-E-C-R-E-T

III. Evaluations: (This student's performance indicated by asterisk.)

- A. Two double agent problems and one walk-in problem requiring case analysis. This analysis involves thorough study of the case:
1. To determine areas of missing, inadequate, or questionable information.
 2. To pick out information which can be checked through other sources.
 3. To recognize all possible leads.
 4. To assess the risk involved.
 5. To propose appropriate action (operational decisions).

	Fail	Poor	Satis	Exc	Sup	Incomplete
Ratings in this class		6	8 *			1
Total of ratings in 15 classes	1	15	199	18		4

- B. Four written exercises requiring analysis of assigned CR case studies.

	Fail	Poor	Satis	Exc	Sup	Incomplete
Ratings in this class		4	9 *	1		1
Total of ratings in 14 classes			193	24		1

- C. Case Analysis (Student Presentation.)

	Fail	Poor	Satis	Exc	Sup	Incomplete
Ratings in this class			9	6 *		1
Total of ratings in 15 classes			179	49		1

- D. Objective tests based on all sections of the course.

	Fail	Poor	Satis	Exc	Sup	Incomplete
Ratings in this class		2	7	5 *		1
Total of ratings in 15 classes	5	54	132	43	1	1

[redacted] was received, but his contributions were quite pertinent and advanced the progress of the other discussions. In his written work he showed a sound knowledge [redacted] but in other aspects of the cases and problems his efforts were more casual. His student presentation demonstrated a cautious approach and a comprehensive analysis [redacted]

Excellent The student demonstrated outstanding ability or proficiency in meeting this course goal or objective; he indicated an unusually thorough knowledge of the material presented, or, if skills were involved, he demonstrated that he was one of the most effective individuals in this area.

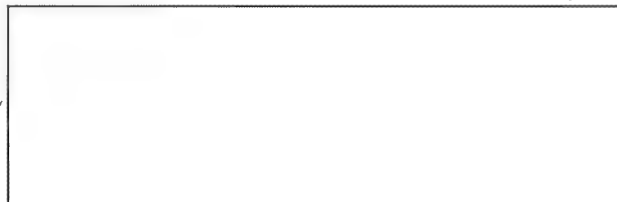
Good The student showed unusual competence, skill, or ability in meeting this objective or goal; he demonstrated a thorough grasp of the material presented, or, if skills were involved, he demonstrated that he could perform in an extremely effective manner in this area.

Satisfactory The student met this objective in a competent and adequate manner; he demonstrated a good understanding and a grasp of the information presented, or if skills were involved, he demonstrated sufficient competence to operate effectively in this area.

Fair Although the student may have met some of the standards set for a student achievement of this course goal or objective, he demonstrated serious gaps in knowledge or sufficient lack of skill to be considered competent.

Unsatisfactory The student was unable to grasp the concepts or information presented, or demonstrated that he had not acquired the necessary information and skills to operate at even minimum competency in this area.

FOR THE SIGNATURE OF TEACHER



SECRET

REPORT OF [] TRAINING

Date: 27 Oct 1955

Grade:

1. Pseudo: []

2. Office: [] Division: []

Branch: []

3. Project Assignment: []

4. Dates Trained: 10 Oct 1955

Location: []

5. Training Received:

Basic SW: Briefing in use of []
F S: No restoration.
Other: []

6. Evaluation: []

[] is able to spend only about three hours in the briefing session. During this time, he was able to use all bases systems assigned for [] and, since he will be able to get help from [] if necessary, he should have no difficulty with them. Further training would be required []

7. Instructor: []

Chief, []

SECRET

SECRET

(When Filled In)

LANGUAGE DATA RECORD

PART I-GENERAL

1. NAME (Last-First-Middle) (17-34)		2. DATE OF BIRTH (25-30)		
		MONTH	DAY	YEAR
		June	70	1963
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39)		5.	
German	MONTH	DAY	YEAR	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
	May	2	1967	

PART II-LANGUAGE ELEMENTS

SECTION A.

Reading (40)

1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.
5. I HAVE NO READING ABILITY IN THE LANGUAGE.

SECTION B.

Writing (41)

1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.
5. I CANNOT WRITE IN THE LANGUAGE.

SECTION C.

Pronunciation (42)

1. MY PRONUNCIATION IS NATIVE.
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.
5. I HAVE NO SKILL IN PRONUNCIATION.

CONTINUE ON REVERSE SIDE

CONTINUATION OF PART II-LANGUAGE ELEMENTS

OFFICE OF PERSONNEL

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 24.115, PAR. 1C143. I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

SIGNATURE

2 May 1957

1401

1402

SECRET

(When Filled In)

LANGUAGE DATA RECORD

PART I-GENERAL

1. NAME (Last-First-Middle) (7-24)		2. DATE OF BIRTH (15-30)		
		MONTH	DAY	YEAR
		June	16	1981
3. LANGUAGE (31-32)	4. TODAY'S DATE (38-39)		5.	
Japanese	MONTH	DAY	YEAR	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
379	May	2	1957	

PART II-LANGUAGE ELEMENTS

SECTION A.

Reading (40)

1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.
- ☒ 5. I HAVE NO READING ABILITY IN THE LANGUAGE.

SECTION B.

Writing (41)

1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.
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- ☒ 5. I CANNOT WRITE IN THE LANGUAGE.

SECTION C.

Pronunciation (42)

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- ☒ 2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.
5. I HAVE NO SKILL IN PRONUNCIATION.

CONTINUE ON REVERSE SIDE

CONTINUATION OF PART II-LANGUAGE ELEMENTS

SECTION D. Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
- ☒ 4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E. Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS; BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
- ☒ 4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
- ☒ 4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD, PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 24-115, PAR. 10(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT, IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE REVOLUTIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

2 May 1967

SIGNATURE

(43)

(44)

CONFIDENTIAL

[illegible]

OFFICE OF PERSONNEL

Figure 4 (back)
CONFIDENTIAL

15 February 1956

CONFIDENTIAL

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED INDIVIDUAL HAS BEEN UNDER YOUR SUPERVISION ON

26 months

2. IS READY, WILLING AND ABLE TO SHOULDER ADDITIONAL RESPONSIBILITIES INHERENT IN A MORE RESPONSIBLE POSITION IN THE ORGANIZATION. HE HAS THE INTELLIGENCE, KNOW-HOW, ENTHUSIASM AND DRIVE THAT THE ORGANIZATION DESIRES IN ITS OFFICERS.

SECTION II. FUTURE PLANS

3. OTHER DEVELOPMENT OR EXPERIENCE PLANNED FOR THE INDIVIDUAL

is scheduled for assignment in Headquarters, which he is fully qualified to handle. It is hoped he will, during his Headquarters tour, be able to take the Basic Management training course. After his headquarters tour, should receive a field assignment to make full use of his abilities.

4. FACTORS INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

is happily married to an intelligent young lady, and they have two attractive daughters. His wife is willing to go anywhere her husband desires.

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words liberally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "Category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

1. HAVE NOT OBSERVED THIS. HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

2. APPLIES TO THE INDIVIDUAL TO THE GREATEST POSSIBLE DEGREE

3. APPLIES TO INDIVIDUAL TO A LIMITED DEGREE

4. APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE

5. APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE

6. APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE AND HEAR THE POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS APPLICABLE TO DISCREPANCIES WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WITH LITTLE ADVICE	5	12. SHOWS INITIATIVES	3	22. EMPLOYERS' DECISIONS OF INTEREST TO HIM
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS CAPABLE IN HIS OWN RIGHT	3	14. SHOWS HIS ABILITY	4	24. DOES NOT LET OTHERS PRESSURE
4	5. SHOWS COURTESY TO ALL PERSONS AND THINGS	3	15. REPORTS WELL TO SUPERVISOR	4	25. DISPLAYS ALLEGIANCE
3	6. DOES NOT GET INTO DISPUTES	4	16. DOES HIS JOB WITHOUT SHOWING LAZINESS	4	26. IS SECURITY CONSCIOUS
4	7. GETS ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS PUNCTUAL
3	8. HAS INTEREST FOR THE WORK	3	18. IS CAREFUL	3	28. HAS A GOOD REPUTATION
4	9. IS A GOOD TEAM PLAYER	4	19. SHOWS COURTESY	4	29. EXHIBITS GOOD PERSONALITY
4	10. CAN GET ALONG WITH ALL TYPES OF PEOPLE	3	20. EXHIBITS PERSONALITY	4	30. DOES NOT SHOW STRONG OPINION ON ALL MATTERS

MAIL ROOM

95-117-11-21-56

OFFICE OF PERSONNEL

Figure 2 (back)

SECRET

23072

CUMULATIVE TRAINING RECORD					DATE
NAME					PP 1 October 1955
PROJECTED PERSONNEL ACTION					
PROMOTION <input checked="" type="checkbox"/> REASSIGNMENT <input type="checkbox"/> OTHER (Explain)					
DETACHMENT <input type="checkbox"/> TRAVEL <input type="checkbox"/>					
FROM: Ops Off PP, GS-13, [redacted]					TO: Ops Off PP, GS-13, Hqs. 17 Sept 51
X	COURSE	DATE TAKEN	X	COURSE	DATE TAKEN
	BASIC ORIENT. ALSO DIC, BITC, SDC, BIP, PH I			AIR OPS. 1 2 3 4 5	
	CLAND. M & T. ALSO OC, PH II	5/10-6/11/53		WAR. OPS. 1 2 3 4 5	
	CLAND. OPS. ALSO AIC, AITC, AOC, CAI, PH III			CLAND. PLD. ACT. 1 2 3 4 5 6	
	RESISTANCE OPS. ALSO PM, I-II, III RAPP			SURVIVAL 1 2 3 4 5 6	
R	CLAND. SERV. REV			BASIC PHOTO	
	WORLD COMMUNISM	880 CPO		DOCUMENTATION	
A	ANTI-COMM. OPS.			LOCKS	
	ADMIN PROCEDURES			SECRET WRITING	
	OPS. SUPPORT			FLAPS & SEALS	
	TRADE CRAFT PHASE			SMALL ARMS FAM.	
	ADMIN PHASE			OTHER TRAINING	
	REPORTS			CPO	7-18/12/53
	ORDER OF BATTLE			CIA Q.	2-5/10/51
	COUNTERESPIONAGE				
	ADV. COUNTER-ESPIONAGE				
	OPS. SECURITY				
	WAR PLANS				
X	CLAND. POL. WAR.				
	STAYBEHIND OPS.				
	TECH. DEV. ORIENT.				
	INST. TECH.				
	EVASION-ESCAPE				
	SAB. OPS.				
	INVEST. TECH. ALSO CI TECH.				
	ADMIN REFRESHER				
	SGO. IMPROVE.				
	BASIC SUPV.				
A	BASIC MGMT.			PHE TEST	
	BALLOON OPS.			ASSESSMENT	
TO: Personnel Officer,					FROM: Car [redacted]
<p>The above projected personnel action has been <input checked="" type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.</p> <p>Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.</p>					
DATE					SIGNATURE
20 November 1956					[redacted]

SECRET

(2-4-53)

SECRET
(When Filled In)

FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to Headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I

LEAVE	SE ONLY	1. DATE OF BIRTH	2. SEX	3. SERVICE DESIGNATION
			M	WFOCMI SP:DP
4. GRADE	5. STATION DESIGNATION (Current)			
GS-12				
6. DUE DATE OF THIS REPORT	7. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
	31 March 1954 - 1 May 1955			

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Senior Kagage Officer, Singapore	31 March 1954
3. STATE THE SPECIFIC ASSIGNMENTS OF TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)	

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES	
1. NAME OF RATER (True)	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
3. THIS REPORT WAS NOT SIGNED TO THE INDIVIDUAL BEING RATED.	
4. DATE REPORT AUTHENTICATED BY HQ	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE THIS REPORT
Aug. 1955	

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

SECRET
(When Filled In)

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS		CATEGORIES					
		NOT OBSERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
SAMPLES	A. ABLE TO SEE ANOTHER'S POINT OF VIEW.			X			
	B. PRACTICAL.					X	
	1. A GOOD REPORTER OF EVENTS.					X	
	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.					X	
	3. CAUTIOUS IN ACTION.					X	
	4. HAS INITIATIVE.						X
	5. UNEMOTIONAL.					X	
	6. ANALYTIC IN HIS THINKING.						X
	7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.						X
	8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.					X	
	9. HAS SENSE OF HUMOR.					X	
	10. KNOWS WHEN TO SEEK ASSISTANCE.					X	
	11. CALM.					X	
	12. CAN GET ALONG WITH PEOPLE.					X	
	13. MEMORY FOR FACTS.						X
	14. GETS THINGS DONE.					X	
	15. KEEPS ORIENTED TOWARD LONG TERM GOALS.					X	
	16. CAN COPE WITH EMERGENCIES.					X	
	17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.					X	
	18. HAS STAMINA; CAN KEEP GOING A LONG TIME.					X	
	19. HAS WIDE RANGE OF INFORMATION.					X	
	20. SHOWS ORIGINALITY.					X	
	21. ACCEPTS RESPONSIBILITIES.					X	
	22. ADMITS HIS ERRORS.					X	
	23. RESPONDS WELL TO SUPERVISION.					X	
	24. EVEN DISPOSITION.					X	
	25. KEEPS TO DO HIS JOB WITHOUT STRAYING.					X	

SECRET

Person - Filled In

SECRET

SECRET

(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS:
no.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY?

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

none. Experience in the field is what is needed.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):
none.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☐ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY. WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION. IRKED BY RESTRICTIONS. REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION. BOTHERED BY MINOR FRUSTRATIONS. WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT. HAS "WAIT AND SEE" ATTITUDE. WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION. MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION. THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- ☒ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION. BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- ☐ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION. WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☒ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating. Skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE. HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY. WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE. DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE. HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- ☐ 5. A FINE EMPLOYEE. HAS SOME OUTSTANDING STRENGTHS.
- ☒ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- ☐ 7. FACILELY BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. NAME (Last) (First) (Middle)		2. GRADE	3. POSITION TITLE	
		GS 11	Ops Off	
4. OFFICE	STAFF OR DIVISION	BRANCH	<input checked="" type="checkbox"/> DEPT'L.	IF FIELD, SPECIFY STATION
DDP	FE	FI	<input type="checkbox"/> FIELD	
5. PERIOD COVERED BY REPORT From To		6. TYPE OF REPORT		
		<input type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

- Exercise staff supervision over and assist Branch VP officers in the conduct of operations.
- Advise my chief on the problems and developments in the conduct of Branch VP operations.
- Conduct liaison with elements of DD/P Senior Staff.
- Plan and coordinate division-wide and division participation

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
Basic Psychological Warfare Seminar		4 months	May 1952
Advanced Psychological Warfare Seminar		6 months	Nov 1952

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

Psychological and political warfare operations.

IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).

10.

11 Sept 1953

DATE

SIGNATURE

Items 11 through 13 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

- Has done a superior job in selling himself and his ideas to his seniors as well as subordinates both within and outside the FE Division.
- Should be recognized for his creative thinking and outside studies on his own time in support of this assignment.

SECRET
SECURITY INFORMATION

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT WORK MOST NOTICEABLY GOOD OR OUTSTANDING?
See Para. 11 (b) and realistic application
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?
Should concentrate on more concise oral presentations.
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.
Capable of added responsibilities and with proper guidance and experience has almost unlimited capabilities.
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)
No.
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?
Due for complete training prior to field assignment in January 1954.
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE. NA
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.
21 Dec 1953
DATE
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in Item 20.)
28 Dec 1953
DATE
20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)

SECRET

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. NAME		2. GRADE GS-12	3. POSITION TITLE Ops Officer (PW)	20-PP
4. OFFICE DDP	5. STAFF OR DIVISION FE	6. BRANCH FE/PP	<input checked="" type="checkbox"/> DEPT'L. <input type="checkbox"/> FIELD	7. IF FIELD, SPECIFY STATION
8. PERIOD COVERED BY REPORT From 2-17-53 To 9-17-53		9. TYPE OF REPORT <input type="checkbox"/> Initial <input type="checkbox"/> Reassignment <input type="checkbox"/> Annual <input type="checkbox"/> Reassignment of Supervisor <input type="checkbox"/> Special		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

See period 2-17-52 to 2-17-53 report - No Change

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).

10.

DATE	SIGNATURE
------	-----------

Items 11 through 14 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. <input type="text"/>	2. GRADE GS 11	3. POSITION TITLE Ops Off	CD-1
4. OFFICE DLP	STAFF OR DIVISION FE	BRANCH PF	<input checked="" type="checkbox"/> DEPT'L <input type="checkbox"/> FIELD IF FIELD, SPECIFY STATION
5. PERIOD COVERED BY REPORT From <input type="text"/> To <input type="text"/>		6. TYPE OF REPORT <input type="checkbox"/> Initial <input type="checkbox"/> Reassignment <input type="checkbox"/> Annual <input type="checkbox"/> Reassignment of Supervisor <input type="checkbox"/> Special	

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

1. Exercise staff supervision over and assist Branch PF officers in the conduct of operations.
2. Advice by chief on the problems and developments in the conduct of Branch PF operations.
3. Conduct liaison with elements of DD/P Senior Staffs.
4. Plan and coordinate division-wide and division participation

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
Basic Psychological Warfare Seminar		4 months	May 1952
Advanced Psychological Warfare Seminar		6 months	Nov 1952

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

Psychological and political warfare operations.

IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).

DATE	SIGNATURE
------	-----------

Items 11 through 12 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

a. Has done a superior job in selling himself and his ideas to his seniors as well as subordinates both within and outside the FE Division.

b. Should be recognized for his creative thinking and outside studies on his own time in support of this assignment.

SECRET
SECURITY INFORMATION

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB ~~WORTH APPRAISING~~ ~~WORTH~~ OR OUTSTANDING?

See Para. 11 (b) and realistic application

13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?

Should concentrate on more concise oral presentations.

FILED SECTION

14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.

Capable of added responsibilities and with proper guidance and experience has almost unlimited capabilities.

15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? ~~Recommend appropriate reassignment, if possible.~~

No.

16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?

Due for complete training prior to field assignment in January 1954.

17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN "UNSATISFACTORY", THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.

18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.

DATE

SIGNATURE OF SUPERVISOR

19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in Item 20.)

DATE

SIGNATURE OF REVIEWING OFFICIAL

20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)

SECRET

SECRET

TRAINING EVALUATION

OPERATIONS

IMPORTANT: The official to whom this report is entrusted is personally responsible for it. He may show it to other members of his staff or to the student concerned if such action is considered necessary and advisable. This report summarizes the test results. Observations and opinions of the various instructors for the course listed only. More complete data are available in the files of the office of Training (Covert), and may be examined after contacting the Training and Evaluation Officer. Any questions as regards the evaluation of this student should be referred to the Chief, Training and Evaluation, TP(C).

NAME OF STUDENT (Last)	AGE	GRADE (GS OR NAVAL)	DATE OF REPORT
	32	GS-12	13 November 1953
DIVISION	PROJECTED ASSIGNMENT		COURSE NO.
	Senior PP Officer		4

PERFORMANCE RECORD

THE FOLLOWING GRADES SHOW THE ACHIEVEMENT OF THE STUDENT IN THE MAJOR ELEMENTS OF THE COURSE. TWO GRADES ARE ASSIGNED IN EACH AREA. ONE FOR COMPREHENSION AND ONE FOR IMPLEMENTATION. A SPECIFIC DEFINITION OF EACH OF THESE TERMS, AS WELL AS OF THE ADJECTIVAL RATINGS EMPLOYED, IS GIVEN ON THE BACK OF THIS EVALUATION FORM.

MAJOR ELEMENTS	ADJECTIVAL RATINGS									
	FAILURE		POOR		SATISFACTORY		EXCELLENT		SUPERIOR	
	COMP.	IMP.	COMP.	IMP.	COMP.	IMP.	COMP.	IMP.	COMP.	IMP.
1. Organization of Clandestine Operations										
2. Cover										
3. Communications							X	X		
4. Target Analysis								X	X	
5. Criteria For Agent Selection								X	X	
6. Agent Recruitment								X	X	
7. Agent Handling								X	X	
8. Agent Direction								X	X	
9. Assignment and Reassignment									X	X
10. Special Operational Problems								X	X	

TRAIT RECORD

THE FOLLOWING INDICATES THE VARIOUS TRAITS AS OBSERVED BY THE INSTRUCTORS DURING THE TRAINING PERIOD. THE OBSERVATIONS INCLUDE THE STUDENT'S PARTICIPATION AND CONDUCT IN TRAINING AS WELL AS HIS REACTIONS TO VARIOUS PROBLEMS AND SITUATIONS.

A. Constructive Imagination (NOT OBSERVED)				
1 Lacked constructive imagination. Showed only a very limited degree of constructive imagination.	2 Showed only a very limited degree of constructive imagination.	3 Showed sufficient constructive imagination to meet most school situations adequately.	4 Demonstrated the possession of creative, active ability to a greater than average degree.	5 Outstandingly creative, inventive, or original.
B. Astuteness (NOT OBSERVED)				
1 Appeared glib and naive.	2 Exhibited below average shrewdness and discernment.	3 Displayed adequate judgment and perspicacity.	4 Displayed above average perspicacity and shrewdness.	5 Displayed exceptional shrewdness and perspicacity.
C. Industry (NOT OBSERVED)				
1 Did not show sufficient application of time and effort.	2 Applied only the minimum amount of time and effort necessary.	3 Showed adequate compliance as regards time and effort necessary.	4 Volunteered greater time and effort than is normally expected in this course.	5 Was unusually industrious, giving generously of time and effort.
D. Initiative (NOT OBSERVED)				
1 Consistently failed to act without being specifically instructed to do so.	2 Generally exhibited a low level of initiative but occasionally acted on his own.	3 Normally took steps to implement ideas without external prompting.	4 Usually displayed enthusiasm and aggressiveness in carrying out projects.	5 Displayed unusual energy, enthusiasm, and aggressiveness.

F. Ability to Write (NOT OBSERVED ☐)

1	2	3	4	5
Failed unable to express thoughts clearly in written form.	Was weak in expressing thoughts clearly in written form.	Written work showed no significant weakness.	Good good ability to express thoughts clearly in written form.	Was outstanding in ability to express ideas in clear, correct, coherent manner.

G. Facility of oral expression (NOT OBSERVED ☐)

1	2	3	4	5
Unable to express self clearly. Presented ideas in groping and incoherent fashion.	Lacked fluency or ease in his speech, but meaning usually clear.	Displayed reasonable facility in oral expression.	Spoke confidently, conveying ideas clearly and readily.	Outstanding in fluency and clarity of oral expression.

H. Ability to Get Along With Associates. (NOT OBSERVED ☐)

1	2	3	4	5
Frequently alienated his associates.	Failed to win social acceptance but did not actively antagonize others.	Reasonably effective in his social relations.	Displayed definite ability to achieve harmonious relationships with his associates.	Unusually effective in his ability to win acceptance from others.

I. Ability to Influence His Associates. (NOT OBSERVED ☐)

1	2	3	4	5
Withdrawn from group activities, showing little interest in the actions of others.	Normally, showed little interest in the actions of others.	Was fairly successful in getting a point or himself.	Was excellent at getting his own personality and thinking.	Was outstanding in respect and attention through his personality and thinking.

J. Tact (NOT OBSERVED ☐)

1	2	3	4	5
Harshly blunt and indiscreet.	Frequently said or did something which induced an unfavorable reaction.	Reasonably discreet and tactful.	Has good discernment for the appropriate thing to say or do.	Consistently demonstrated keen perception for fitting speech or conduct.

K. Adaptation to Training (NOT OBSERVED ☐)

1	2	3	4	5
Displayed no interest or enthusiasm for training and failed to adapt himself to the demands made upon him.	Accepted training program reluctantly and had difficulty adapting himself to the training routine.	Displayed average interest in and acceptance of training.	Displayed an excellent acceptance of training and readily adapted to demands made upon him.	Outstanding in his acceptance of training and display of enthusiasm and interest.

Subject was outstanding in his performance and especially so in his ability to adjust to training. He met and exceeded all normal requirements. His superior thinking ability allows him to cover most of the ground on all pertinent points rapidly and it is only through deliberate self-control that he slows down sufficiently to make an easily understandable oral presentation.

His imaginative analytical ability made him a natural for directing clandestine activity. His professional background would make him very worthwhile for consideration by the Office of Training upon completion of his contemplated tour of duty in the field.

APPROVED		SIGNATURE OF CHIEF INSTRUCTOR	
SIGNATURE OF DEPUTY FOR STAFF TRAINING		REVIEWED	
		SIGNATURE OF CHIEF, TRAINING AND EVALUATION	

S-E-C-R-E-T
Security Information

SUBJECT: Training Evaluation

Course, Advanced Training Division

Student's Name

Course No. 19

Division and Branch FE-5/PP

Grade GS-12

Age 32

A combination of lectures, seminars, and written assignments is utilized, and the evaluation is based on the observation of the instructional staff. The supervisor is cautioned that this evaluation should be considered subjective in nature and applies only to the two weeks' period of the course. In those cases where no comment is given for one phase or activity, it does not imply that the student is deficient but only that the instructors do not feel that they have sufficient basis upon which to place a meaningful evaluation.

1. Student Performance in the Classroom:

Mature comprehension of the World Communist Movement and the varied aspects of its theory and practice. A developed feeling for current relationships between "national" Communist Parties' practices and the World Communist Movement, including its organization, strategy, tactics, and operations.

Superior comprehension -- in his area of assignment he was especially effective in his grasp of CP operations and tactics.

2. Willingness to Share Own Experiences or Thinking

Freely expressed ideas when appropriate to the subject.

3. Ease of assimilation in the group - pleasant, co-operative relationship:

Pleasant but reserved.

S-E-C-R-E-T

S-E-C-R-E-T
Security Information

4. Cooperation with the staff in presenting pertinent suggestions as to future material for the course with the purpose of the improvement of same:

Appreciative of the course; suggested valuable background material for incorporation in certain subjects.

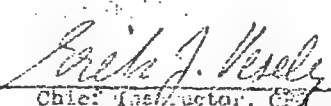
5. Efficient use of study periods and after hours to read materials contained in student folders, including materials assigned for home study with the resulting reflection in class participation:

Used all available time and materials for study during and after class.

6. Class attendance and compliance with training and security regulations:

Punctual and security conscious.

Instructors' over-all comment where appropriate.


Chief Instructor, CE

Date 22 December 1953

S-E-C-R-E-T

1 December 1952

1. Name: 2. Grade: GS-11
3. Position: _____
4. Period for which report is made: _____
5. Exact nature of his assignment: _____
- Time in Grade: 9 months

Education: _____

Previous Experiences: _____

	Unsatisfactory	Poor	Good	Very Good	Excellent	Superior	Outstanding
His efficiency in carrying out this assignment							✓
Degree to which he extended himself in fulfilling his assigned duties							✓
His ability to get along with his associates						✓	
His ability to get along with indigenous personnel							N.H.
The conduct of his social and personal life insofar as it affected the performance of his duties					✓		
His ability to carry out his duties in the face of discouragement and frustration							
His political conviction and attitude toward the Government						✓	
His attitude toward current events as reported by the press					✓		
Emotional stability under stress							N.H.
Degree to which he shows initiative					✓		
Ability to work without supervision							✓

6. Other Comments: N.H.

Signature of immediate supervisor

I agree with the evaluation of the supervisor except for the following:

Date of report

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH	SOCIAL SECURITY NUMBER
<input type="text"/>			<input type="text"/>	714 12 4732
EMPL	LOCATION (City, State, ZIP Code)			

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance

☐
(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

☒
(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance

☐
(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STUB," THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

STATISTICAL STUB

15/4/68

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
FEB 20 11 23 AM '68

SECRET

See Table of Effective Dates on back of Original

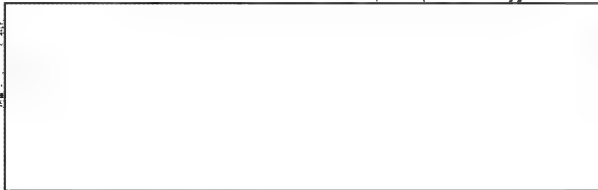
ORIGINAL COPY—Retain in Official Personnel Folder

STANDARD FORM NO. 176-1
JANUARY 1953
For use with GSA Form 14, 1953
176-101

CONFIDENTIAL
(When Filled In)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 9 July 1970, and the information brochure for PCS returnees, dated May 1964.



12/16/71
12/16/71

CONFIDENTIAL
(When Filled In)

MEMORANDUM OF UNDERSTANDING

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (Last, first, middle initial only if SA)		DATE (from item S-1)	NAME OF SUPERVISOR (true)	DATE (from item S-2)
		21 Oct. 1970		21 Oct. 1970
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
29 Oct. 1970				
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
16 June 1921	D			
6A. DATE OF PCS ARRIVAL IN FIELD	6B. REQUESTED DATE OF DEPARTURE	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
21 June 1969				
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Three: wife 47, daughter 19, son 11				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 740-8)				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
None				

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11a. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

I prefer to continue in my present assignment.

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

- ☒ EXTEND YOUR 18 months MONTHS AT CURRENT STATION TO Jan 1973 (DATE)
- ☐ BE ASSIGNED TO HQ/RS FOR A TOUR OF DUTY: INDICATE YOUR CHOICE OF DIVISION, STATE OR OFFICE.
1ST CHOICE WH 2ND CHOICE DO 3RD CHOICE OTR
- ☐ BE ASSIGNED TO ANOTHER FIELD STATION: INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE WH 2ND CHOICE EUR 3RD CHOICE FE
- ☐ RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Subject's wish to return here for another tour fits our ideas of what would be good for him and the Station. His function in the Station will continue and he performs it very well. Even should there be a readjustment in the amount of case officer time put into his field, there will still be enough—probably more than enough—for him to do. He does it very well. This recommendation would be modified if Subject were given an opportunity for a post which might give him a better chance for promotion, which he TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE would like and which he

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

 has been approved for home leave and return to for a second tour of duty.

DATE 23 Nov 70 TITLE C/WH/Personnel SIGNATURE

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. TFO:
CABLE NO. TFO:

CAREER SERVICE REPRESENTATIVE: DATE:

SECRET

SECRET
(When Filled In)

FILE

PUNCHED

BY

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

INSTRUCTIONS:

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATED BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
26-28	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38-39	40-42
06	27	69							45

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	37	38-39	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY

**RE-DATE INDICATED ON
CORRESPONDING DOCUMENT**

**ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE
DOCUMENT CITED**

DATE

SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET

Supplement to Staff Employee Personnel

Action for Integration of [redacted]

Effective 21 May 1969

The purpose of this memorandum is to set forth existing policies of concern to you while integrated and to reiterate certain rights and obligations which derive from your true status as an appointed employee. It is hereby agreed and understood that:

1. As an employee of this organization, at the present grade and salary of GS-14 \$19,771.00 per annum, [redacted] another instrumentality of the Government (hereinafter referred to as [redacted]) effective as of 21 May 1969. You will, insofar as consistent with your basic responsibility to this organization, abide by all the rules, regulations, practices and policies of your cover facility, in order to appear as a conventional member of that establishment. Your [redacted]

2. It is understood and agreed that the minimum period of your overseas tour of duty is governed by and coincident with the prescribed tour of duty [redacted]. Currently, your prescribed tour consists of a period of two (2) years from the date of your arrival at your overseas post of duty. Your assignment may be terminated earlier for the convenience of this organization and the length of your tour of duty, as currently specified, may be unilaterally changed by this organization in order to conform with subsequent changes in the prescribed tour [redacted]. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed the minimum period of service prescribed above from the date of arrival at your overseas post of duty, you will not be entitled to return travel or transportation for yourself or your dependents to the United States at Government expense. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed one (1) year of service from the date of your arrival at your overseas post of duty you will be required to reimburse the Government for all of its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.

3. Travel to your post of duty overseas and your return travel to the United States, as well as travel performed overseas which is consistent with [redacted], will normally be at the direction of your [redacted]. Such travel will be accomplished in conformance with applicable [redacted]

FORM 1535

SECRET

(4-12)

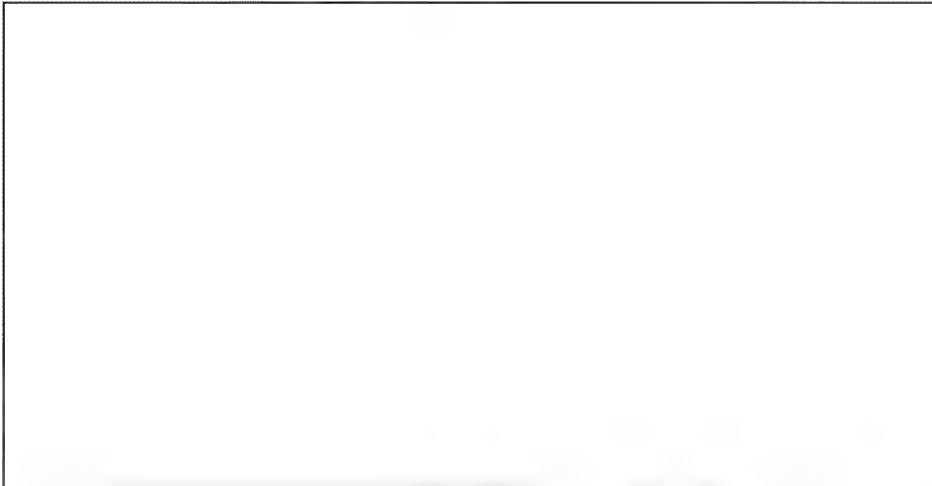
SECRET

regulations [] except when you are directed for operational reasons to perform travel in accordance with the regulations of this organization.

4. Salary and allowances [] shall be retained by you to the extent that they do not exceed the salary and allowance payment due you on the basis of your grade level with this organization.

5. Your status as an employee of this organization will continue in full force and effect during your period of duty with your [] and you will continue to be entitled to all rights, benefits and emoluments of such status. Certain variations in procedure will be required, however, to preserve the security []

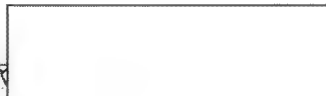
SECRET



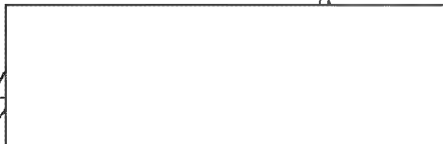
6. You will be required to keep forever secret this agreement and all information which you may obtain by reason hereof, unless you are released in writing by this organization from this obligation. Violation of such secrecy may subject you to criminal prosecution under the espionage laws, as amended, and other applicable laws and regulations. The termination of your employment with this organization will not release you from the obligations of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY



ACCEPTED:



3

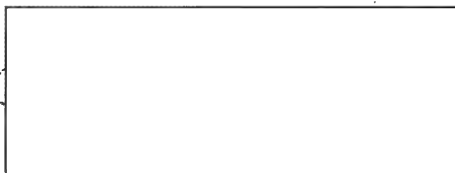
CONFIDENTIAL
(When filled in)

IMPORTANT

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.



13 OCT 1969
Date

CONFIDENTIAL

Group 1 - Excluded from
automatic downgrading
and declassification.

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD										FILE PUNCHED BY RS			
TO: Office of Personnel, Transactions and Records Branch, Status Section													
SERIAL NO.				NAME									
				LAST		FIRST		MIDDLE					
INSTRUCTIONS													
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 99, REVISED.													
PCS DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY		
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE		37	38	39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION						40-42	
						3 - CANCELLATION							
TDY DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREAS		
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE		37	38	39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION						40-42	
						4 - CANCELLATION							
0	4	2	7	6	9	0	5	1	0	6	9		
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA													
SOURCE DOCUMENT AND CERTIFICATION													
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH							
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT							
OTHER (Specify)													
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD							
						4/27/69 @ 1725 - 5/10/69 @ 2130							
REMARKS													
No leave													
PREPARED BY						REPORT APPROVED BY							
SEA						<input checked="" type="checkbox"/> LATERAL DOCUMENT							
C & S DIVISION, CYSG						DATE							
C & S DIVISION						5/13/69							
						SIGNATURE							
						DSV							
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER													

FORM 1451a (1-67) (1-10-69)

SECRET

(8-10)

SECRET

11 MAY
1966

MEMORANDUM FOR: Director of Personnel

SUBJECT:

Change of Home Leave Address

REFERENCE:

29 April 1966

It is requested that the home leave address of ~~██████████~~ be changed from ~~██████████~~ Massachusetts. ~~██████████~~ last remaining relative in ~~██████████~~ died in November 1965, and he has no other connections there. On the other hand his wife has relatives in ~~██████████~~ and his daughter is attending ~~██████████~~ in ~~██████████~~ and he plans to visit this area on home leave.

██████████
C/col/Personnel

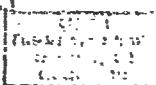
Concur:

██████████
Director of Personnel

12 May 66
(Date)

Attachment:
Reference

SECRET



DISPATCH

CLASSIFICATION
SECRET

PROCESSING ACTION

TO Chief, WH Division

INFO

FROM Chief of Station [redacted]

SUBJECT Change of Home Leave Address of [redacted]

ACTION REQUIRED - REFERENCES

ACTION REQUIRED: As noted below

MARKED FOR INDEXING

NO INDEXING REQUIRED

CALL QUALITY DISK

CAN JUDGE INDEXING

MICROFILM

Distribution:
O 5 - Chief, WHD

GROUP I
Excluded from automatic
downgrading and
declassification

URGENT DATE: 22 APR 66

REPORT NUMBER AND NUMBER

DATE

22 April 1966

SECRET

SECRET

TM-837055

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY			
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (Type)	DATE (from item 5.1)	NAME OF SUPERVISOR (Type)	DATE (from item 5.2)
[REDACTED]	27 Dec. 65	[REDACTED]	28 Dec. 1965
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW: <i>Rec'd C-PS 28 March 1966</i>			

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH 16/6/21	2. GRADE 14	3. CURRENT POSITION TITLE AND GRADE Operations Officer	74. DATE OF PCS ARRIVAL IN FIELD OR THIS TOUR 29/8/64
4. SERVICE DESIGNATION (if known) D	5. CURRENT STATION OR FIELD BASE Buenos Aires		75. EXPECTED DATE OF DEPARTURE FROM FIELD 29/10/66
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR None			76. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS-PCS 29/10/66

8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Page):

[REDACTED]

9. PREFERENCE FOR NEXT ASSIGNMENT:

A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.

I list the choices in question 9 because of the limited opportunity for achievement in operations and as a result I have realized that I will be better suited to the work in the field. I have five years of experience in the field, which should be of use to OIR; I have maintained a high level of political and business contacts which experience should be useful to OIR; my educational background and operational area expertise should help qualify me for OIR.

B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE IN THE ORGANIZATION (refer to coding of courses, if available):

SECRET

8. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:	
<input type="checkbox"/> RETURN TO MY CURRENT STATION	
<input type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY, WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:	
1ST. CHOICE <u>CTR</u> 2ND. CHOICE <u>DDJ</u> 3RD. CHOICE <u>DDJ</u>	
<input type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION, WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:	
1ST. CHOICE _____ 2ND. CHOICE _____ 3RD. CHOICE _____	
19. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?	
INDICATE NUMBER OF WORK DAYS <u>30</u>	
20. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:	
<u>wife and two children; ages: 42, 13, 6</u>	
21. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT.	
<u>Desire to be in the United States for the senior year and graduation from college of my older daughter.</u>	
22. SIGNATURE: _____ COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.	
TO BE COMPLETED BY SUPERVISOR AT FIELD STATION	
23. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:	
<p>The Station concurs in Subject's request for his next assignment. Based on the capabilities that he has demonstrated during his present tour of duty, we have every reason to believe that he will perform in a professional and highly competent manner in either one of the three areas that he has selected. If Subject is considered for another field assignment, it is strongly recommended that he be afforded </p>	
24. SIGNATURE: _____ COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.	
TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS	
25. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:	
<p>The WH Division Personnel meeting of 24 February 1966 concurred with the Subject's request for assignment </p>	
<p align="right">C/WH/Personnel</p>	
26. NAME OF CAREER SERVICE OFFICER OR PERSONNEL OFFICER	SIGNATURE
DATE	_____
FOR USE OF CAREER SERVICE	
27. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	28. REFERENCE DISPATCH NO. _____ CABLE NO. _____
29. TYPED OR PRINTED NAME	30. SIGNATURE
31. TITLE	32. DATE
33. COMMENTS:	
<p><u>WH + CSRS jointly will cable Smith to authorize early return for assignment to CTR. K. Byrd will discuss with Smith while at E.A.</u></p>	

SECRET

KG

SECRET

05028 c
614 5407

MEMORANDUM FOR: Director of Training

SUBJECT: Appreciation: [redacted]

1. With your approval [redacted] of OTR participated as a member of the Survey Team which during January - March 1967 reviewed the effectiveness of the [redacted] of the [redacted]. This involved 30 full Team meetings, interviews with 57 CS officers, various specific inquiries, and numerous drafting sessions.

2. Throughout, [redacted] participated in a most effective professional manner bringing to bear his extensive background in the Clandestine Services. His direct and objective approach to the problems considered in the course of the survey made his contribution to the overall Team effort invaluable. The Team report, which I am still in process of discussing within the Staff will be of considerable value not only to this Staff in our future planning but also, I feel, to the future posture [redacted] of the Clandestine Services, thus I heartily commend [redacted] for his effective participation with the Survey Team in this effort.

3. I would appreciate your conveying my thanks to Mr. Smith.

[redacted]

SECRET

SECRET

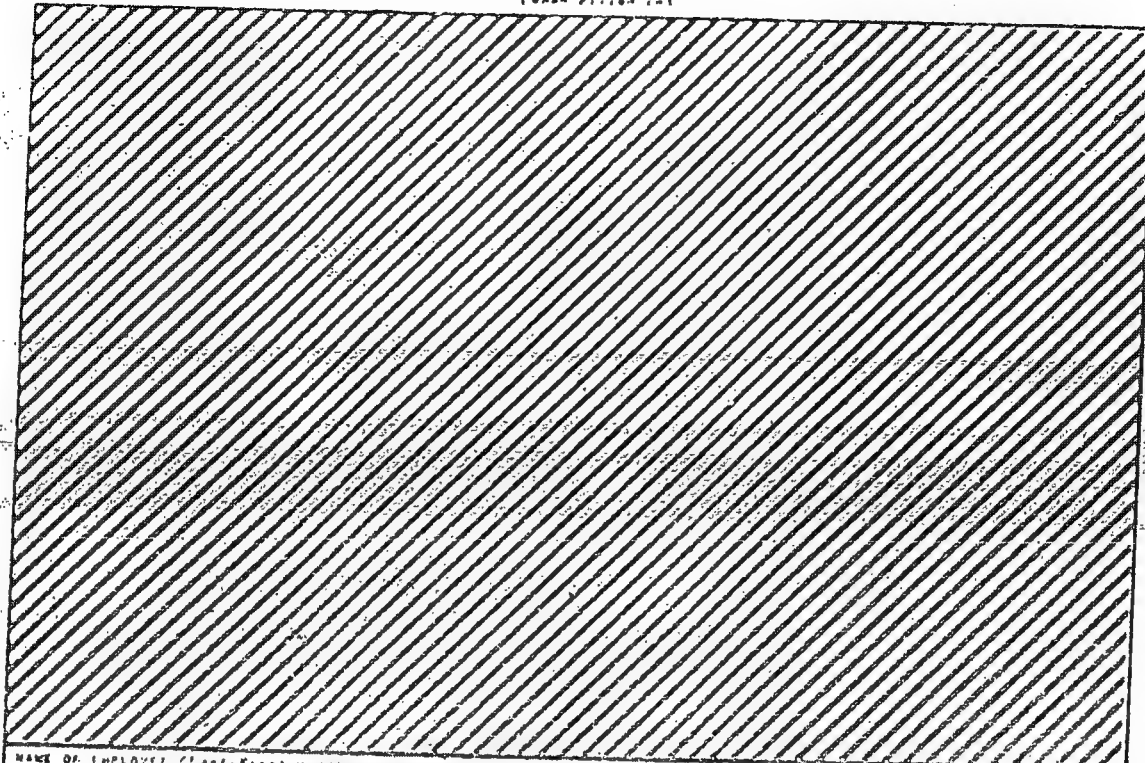
FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
NAME OF EMPLOYEE (Last, First, Middle Initial) AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (Last, First, Middle Initial)		DATE (from item 5-1)	DATE (from item 5-2)
[Redacted]		20 Sep 63	20 Sep 63
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:		DATE	
[Redacted]		25 Sep 63	
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE	7A. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
18 June 1921	GS-14	Operations Officer, GS-12	5 June 1962
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		7B. EXPECTED DATE OF DEPARTURE FROM FIELD
D	[Redacted]		5 June 1964
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7C. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			None
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (from arrival at current post to present):			
[Redacted]			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE INDICATE YOUR CHOICES IN ORDER OF PREFERENCE.			
[Redacted]			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
None, if reassigned to present post.			

SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd, and 3rd choice) IN THE BOXES BELOW:	
<input checked="" type="checkbox"/> 1 RETURN TO MY CURRENT STATION <input checked="" type="checkbox"/> 2 BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT: 1ST. CHOICE <u>Domestic Ops</u> 2ND. CHOICE <u>Division Desk</u> 3RD. CHOICE <u>Division Staff</u> <input checked="" type="checkbox"/> 3 BE ASSIGNED TO ANOTHER FIELD STATION. WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS: 1ST. CHOICE _____	
10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? _____ INDICATE NUMBER OF WORK DAYS <u>30</u>	
11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU: <u>3: aged 40, 11, and 3 years</u>	
11A. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT: <u>Eldest daughter attending college in the United States.</u>	
12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION	
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING: <u>Supervisor and Chief of Station concur with the employee's expressed desires. While assigned to this Station this employee has made an important contribution _____ which doubtless will continue to be the case should he be reassigned to this Station.</u>	
14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS	
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING: <u>Recommend return to Station for second tour of duty.</u>	
16. NAME OF CAREER SERVICE OFFICER OR PERSONNEL OFFICER	SIGNATURE _____
DATE _____	_____
FOR USE BY CAREER SERVICE	
17. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE DISPATCH NO. <u>44-11-11</u> CABLE NO. _____
19. TYPED OR PRINTED NAME _____	20. SIGNATURE _____
21. TITLE _____	22. DATE <u>17 Feb 1954</u>
23. COMMENTS <u>Ret. Division - approved for second tour.</u>	

SECRET


SECRET
(When Filled In)



NAME OF EMPLOYEE (Last, First, Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
<i>Smith, Joseph</i>	<i>Alan ...</i>	<i>...</i>

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent) for an illness, injury, or death incurred on 10 March 61 *apudictis*

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE <i>2-1-61</i>	SIGNATURE OF 
---------------------------------	---

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

[illegible]

1. **Introduction**

such case any money you receive as a result of your participation in such activities shall be returned to this organization. Whether participation in a particular activity is or is not in the public interest will be determined by the organization.

2. Non-Disclosure Agreement. You are hereby authorized, Non-Disclosure Agreement. You will be required to keep secret all information and all information which may come to you in the course of your duties, and to refrain from disclosing such information to any person, except as may be required by the Government or as may be required by the laws and regulations of the United States.

3. Qualification Allowance. You will be authorized an allowance in accordance with applicable regulations.

4. Travel Expenses. You will be entitled to travel, transportation and storage in accordance with the regulations of this organization. HR 2051 provides that travel expenses of integrated personnel will be allowed in accordance with the regulations of their host organizations or HR 22, whichever allows the greater amount.

5. Travel Location. You hereby agree that your assignment abroad will be for a minimum of two years from the date of your arrival at your permanent post of duty. Your assignment shall be sooner terminated by the Government for its convenience. Your violation of such agreement may result in regulatory travel expenses. HR 22-6 provides that if the agreement is violated during the first year of duty abroad, expenditures for travel and transportation to the post, including per diem while at headquarters and storage of effects, shall be reimbursed by the employee. If the agreement is violated after the first year of duty, but before the completion of the minimum tour agreed to above, no Government expense shall not be allowed.

AGREED

6. Secrecy. You will be required to keep secret all information and all information which may come to you in the course of your duties, and to refrain from disclosing such information to any person, except as may be required by the Government or as may be required by the laws and regulations of the United States. Knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws (dated 25 June 1948, as amended) and other applicable laws and regulations.

1A

JUC



SECRET
(When Filled In)

5A

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE		OFFICE/COMPONENT
	LAST (Print)	MIDDLE	
			ES-76 64

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COL TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING 1. NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	ARRIVAL				DEPARTURE				COUNTRY	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR			
1. PCS (Basic)	27	20-29	30-31	32-33	34-35	36-37	38-39		40-42	
3. CORRECTION										
5. CANCELLATION	01	06	05	62					040	

TDY DATES OF SERVICE

TYPE OF DATA	DEPARTURE				RETURN				AREAS	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR			
2. TDY (Basic)	27	20-29	30-31	32-33	34-35	36-37	38-39		40-42	
4. CORRECTION										
6. CANCELLATION										

SOURCE OF RECORD DOCUMENT

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input checked="" type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> OTHER (Specify)	<input type="checkbox"/> DUTY STATUS OR LIVE AND CANCELLATION REPORT

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	8 June 1962

REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDS DATA
FISCAL DIVISION	DATE 6/20/62	SIGNATURE
FINANCE DIVISION		

CONTRACT INFORMATION AND CHECK LIST			
(INSTRUCTIONS) Use B 25-1000 and 24-10-1000. If instructions are not available, use B 25-1000. Instructions B 24-10-1000 are not applicable. Forward original and TWO copies for preparation of contract.		TELEPHONE EXTENSION 6-556	DATE
GENERAL			
1. NAME <input checked="" type="checkbox"/> CREW <input type="checkbox"/> TRUP	2A. PROJECT	3. ALLIANCE NO.	4. SLOT NO.
	2B. PERMANENT NA	3B. FUNDS <input checked="" type="checkbox"/> NA	BAP-0.8
5. PREVIOUS CIA PSEUDONYM OR ALIASES	6. INDIVIDUAL HAS BEEN EMPLOYED BY THE U.S. GOVERNMENT OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) Staff Employee - 9 September 1951 to date		
7. SECURITY CLEARANCE (Type and date) Staff Employee	7A. MEDICAL CLEARANCE <input checked="" type="checkbox"/> OBTAINED <input type="checkbox"/> INITIATED <input type="checkbox"/> NOT REQ'D.	8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input type="checkbox"/> NA <input type="checkbox"/> NO	
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) Staff Agent	
PERSONAL DATA			
11. CITIZENSHIP U. S.	12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO	13. AGE 40	14. D <input type="checkbox"/> (th. day, year)
15. LE <input type="checkbox"/>		16. CURRENT RESIDENCE (City and state or country)	
17. MAR <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED			
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE: <div style="border: 1px solid black; height: 50px; width: 100%;"></div>		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP	
U.S. MILITARY STATUS			
20. RESERVE No	21. VETERAN Yes	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
23. BRANCH OF SERVICE Army	24. RANK OR GRADE Corporal	25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
COMPENSATION			
27. BASIC SALARY 11,650	28. POST DIFFERENTIAL	29. COVER (Breakdown, if any) NA	30. FEDERAL TAX WITHHOLDING COVER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CIA <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)			
31. QUARTERS 3,500	32. POST	33. OTHER Equalization \$915 and 10% Staff Agent Premium pay <i>JS</i>	
34. COVER (Breakdown, if any)			
TRAVEL			
35. TYPE <input checked="" type="checkbox"/> PCS <input type="checkbox"/> DOMESTIC OPERATIONAL <input checked="" type="checkbox"/> FOREIGN OPERATIONAL		36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
37. HMC TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	37A. HMC TO BE STORED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	38. PERSONAL VEHICLE TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH See 18 above.			
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES			
OPERATIONAL EXPENSES			
42. PURCHASE OF INFORMATION	43. ENTERTAINMENT	44. OTHER	
45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES			

CONTRACT INFORMATION AND CHECK LIST (CONTINUED)				CASE OFFICER		DIVISION	
NOTE: SEE INSTRUCTIONS ON FIRST SHEET				TELEPHONE EXTENSION		DATE	
SECTION VIII				OTHER BENEFITS			
48. BENEFITS (See R 20-615, R 20-620, R 20-670, R 20-1000, and R 20-620-1, R 20-1000-1 and/or successor regulations for benefits applicable to various categories of contract personnel.)							
All benefits and allowances of a staff employee.							
SECTION IX				COVER ACTIVITY			
47. STATUS (Check)		49. TYPE (Check)		50. EMPLOYMENT		51. FEEDBACK	
<input checked="" type="checkbox"/> PROPOSED <input checked="" type="checkbox"/> ESTABLISHED		<input type="checkbox"/> PROBATIONARY <input checked="" type="checkbox"/> SUBSIDIZED		<input type="checkbox"/> CIVILIAN <input checked="" type="checkbox"/> MILITARY		<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER	
49. IF COVER PAYMENTS ARE CONTINGENT, THEY WILL BE EFFECTED ON REIMBURSEMENT BASIS							
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL							
SECTION X				OFFSET OF INCOME			
50. OFFSET OF INCOME AND OTHER EVOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.)							
<input type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> NONE							
SECTION XI				TERM			
51. DURATION		52. EFFECTIVE DATE		53. RENEWABLE		54. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION	
DAYS MONTHS YEARS		June 1962		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
54. TERMINATION NOTICE (Number of days)		55. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION					
NA		NA		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
SECTION XII				FUNCTION			
56. PRIMARY FUNCTION (CI, FI, PP, other)							
PP							
SECTION XIII				DUTIES			
57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED							
SECTION XIV				QUALIFICATIONS			
58. EXPERIENCE							
See personnel file.							
SECTION XV				EDUCATION			
59. EDUCATION		60. LANGUAGE COMPETENCY		61. INDIVIDUAL'S COUNTRY OF ORIGIN		62. AREA KNOWLEDGE	
(Check Highest Level Attained)		(Check Appropriate Degree Competency)		U.S.A.		Graduate study, History & Politics (2 courses). Chief, [redacted] (6 mos.)	
GRADE SCHOOL		SPEAK		WRITE		READ	
COLLEGE (No degree)		COLLEGE DEGREE		POST GRADUATE			
FLUENT		FLUENT		FLUENT		FLUENT	
Spanish		X		X		X	
Japanese		X		X		X	
German		X		X		X	
Malay		X		X		X	
SECTION XVI				EMPLOYMENT PRIOR TO CIA			
63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING							
See personnel file.							
SECTION XVII				ADDITIONAL INFORMATION			
64. ADDITIONAL OR ORIGINAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (For other side of necessary)							
DATE				SIGNATURE			
[redacted]				[redacted]			

SECRET
(When Filled In)

PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE
INSTRUCTIONS		
This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.		
SECTION I GENERAL		
1. <input type="checkbox"/> <input type="checkbox"/>		
2. CURRENT ADDRESS (No., Street, City, Zone, State)		3. PERMANENT ADDRESS (No., Street, City, Zone, State)
		Some in 2
4. HOME TELEPHONE NUMBER		5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE
None		Foreign
SECTION II PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
1. NAME (Last-First-Middle) preferably residing in U.S.		2. RELATIONSHIP
3. HOME ADDRESS (No., Street, City, Zone, State, Country)		
Same as above		
4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country) - INDICATE NAME OF FIRM OR EMPLOYER IF APPLICABLE		
NA		
5. HOME TELEPHONE NUMBER	6. BUSINESS TELEPHONE NUMBER	7. BUSINESS TELEPHONE EXTENSION
None at present	NA	NA
8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.		
NO OTHER CLOSE RELATIVES		
SECTION III MARITAL STATUS		
1. CHECK (X) ONE: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED		
2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS		
NOTE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancé.		
3. NAME		
4. DATE OF MARRIAGE		
1960-04-11		
5. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country)		
1012 1/2 Street NW, Washington, D.C.		
6. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
7. DATE OF DEATH		
8. CAUSE OF DEATH		
9. CURRENT ADDRESS (Give last address, if deceased)		
Same as above		
10. DATE OF BIRTH		
1 Sept 1924		
11. PLACE OF BIRTH (City, State, Country)		
Piquette, PA USA		
12. IF BORN OUTSIDE U.S., DATE OF ENTRY		
1948		
13. PLACE OF ENTRY		
NA		
14. CITIZENSHIP (Country)		
USA		
15. DATE ACQUIRED		
1948		
16. WHERE ACQUIRED (City, State, Country)		
NA		
17. OCCUPATION		
NA		
18. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers)		
NA		
19. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)		
NA		

SECTION III CONTINUED TO PAGE 2

SECRET

(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE OF SPOUSE (From and To) BY MONTH AND YEAR <i>APRIL 1945 - FEB 1946</i>	
22. BRANCH OF SERVICE <i>U.S. AIR FORCE</i>	23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED <i>U.S.</i>
24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN <i>None</i>	

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1	1. FULL NAME (Last-First-Middle) <i>1/1</i>	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES			
5. CITIZENSHIP (Country)		6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
2	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES			
5. CITIZENSHIP (Country)		6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
3	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES			
5. CITIZENSHIP (Country)		6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
4	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES			
5. CITIZENSHIP (Country)		6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.	
3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.	
5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS.	

SECTION V CONTINUED TO PAGE 3

SECRET

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(When Filled In)

SECTION V CONTINUED FROM PAGE 2

6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION

ADDRESS (City, State, Country)

7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? ☐ YES ☒ NO

8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)

None

SECTION VI

CITIZENSHIP

1. COUNTRY OF CURRENT CITIZENSHIP

2. CITIZENSHIP ACQUIRED BY: CHECK (X) ONE:

☒ BIRTH ☐ NATURALIZATION ☐ OTHER (Specify):

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? ☐ YES ☒ NO

4. GIVE PARTICULARS

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION. (First papers, etc.)

None

SECTION VII

EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED

☐ LESS THAN HIGH SCHOOL GRADUATE

☐ OVER TWO YEARS OF COLLEGE - NO DEGREE

☐ HIGH SCHOOL GRADUATE

☐ BACHELOR'S DEGREE

☐ TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE

☒ GRADUATE STUDY LEADING TO HIGHER DEGREE

☐ TWO YEARS COLLEGE OR LESS

☐ MASTER'S DEGREE

☒ DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/CTR HRS. COMPLETED (Specify)
	MAJOR	MINOR	FROM	TO			
							?
							?
							?
							?

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS
		FROM	TO	

4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS
		FROM	TO	
Int. Int. Language school	Japanese	1944	1945	?
Int. Int. Language school	Japanese	1944	1944	?

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET

SECRET

(When Filled In)

SECTION VIII

GEOGRAPHIC AREA KNOWLEDGE

1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE KNOWLEDGE GAINED AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR AREA ASSIGNMENT OTHER THAN ORGANIZATION EXPERIENCE. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE," INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, COASTS, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.

NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY			
			RESIDENCE	TRAVEL	STUDY	AREA ASSIGNMENT
Taiwan	Study of map, etc.	—			X	
China	area study	—			X	
Korea	" "	—			X	

2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE

3. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE GAINED KNOWLEDGE AS A RESULT OF ORGANIZATION ASSIGNMENT OR ACTIVITY.

NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY		
			HEADQUARTERS ASSIGNMENT	FIELD ASSIGNMENT	TRAINING
	politics, govt.	1953 (2 years)		X	
	" "	1957-1958		X	
	" "	1958-1960		X	

SECTION IX

TYPING AND STENOGRAPHIC SKILLS

1. TYPING (W.P.M.) 2. SHORTHAND (W.P.M.) 3. SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM

GRECK SPEEDWRITING STENOGRAPHY OTHER (Specify):

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Comptometer, Adding Machine, Card Punch, etc.)

SECTION X

SPECIAL QUALIFICATIONS

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH

Tennis - good

2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK

PROVIDED QUALIFICATION: Teaching Experience

3. EXCLUDING EQUIPMENT NOTED IN SECTION X, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORTRANGE RADIO, MULTILITH, TURF LAMPE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.

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4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, etc.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRY NUMBER, IF ANY.

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5. FIRST LICENSE OR CERTIFICATE (Year of issue) 6. LATEST LICENSE OR CERTIFICATE (Year of issue)

SECRET

SECRET

(When Filled In)

SECTION X CONTINUED FROM PAGE 8

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

5 years Teaching Dictation College community public speaking

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

AMERICAN ASSN. OF UNIVERSITY PROFESSORS, SEVERAL UNDERGRADUATE

SECTION XI. ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
APRIL 1957 - NOV 1959	13	DDP / EE / EE-5
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
29	Deputy Branch Chief	

6. DESCRIPTION OF DUTIES
As usual for the position

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
APR 1958 - MAR 1960	15	DDP / EE / [REDACTED]
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
1	CNS OFFICER	

6. DESCRIPTION OF DUTIES
Senior PP officer concentrating on pol. action activities

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	

6. DESCRIPTION OF DUTIES

(Use additional pages if required)

SECRET

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(When Filled In)

63-115
P-27

LANGUAGE PROFICIENCY AND AWARDS DATA						2. ID NO
1. PERSONNEL SERIAL NO. (1-6)						1036
3. NAME (17-24) LAST		FIRST	MIDDLE	4. OFFICE OR DIVISION	5. LANGUAGE	6. LAMP CODE (25-27)
						725
7. DATE OF TEST (40-51)		8. ANNIVERSARY DATE		9. GRADE	10. DATE OF BIRTH	
May 13, 1962		May 10, 1963		1-1		
11. REASON FOR TAKING TEST		12. TEST SCORES				
12. APPLY FOR AWARD		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)
ESTABLISH SKILL LEVEL		R	I	I	I	I
13. ELIGIBILITY (39)		14. TYPE OF AWARD				
13. A		ACHIEVEMENT (A) ELEMENTARY (E)		READING (R) SPEAKING (S)		BASED ON TRAINING THAT WAS DIRECTED (D) OR VOLUNTARY (V)
M		MAINTENANCE (M) INTERMEDIATE (I)		COMPREHENSIVE (C)		
NA		A		G-11		
15. INELIGIBLE (REASON)				16. I CERTIFY THIS EMPLOYEE FOR A PROFICIENCY AWARD OF \$87.50 (40-43)		
				SIGNATURE		DATE
17. I CERTIFY THAT FUNDS ARE AVAILABLE						
REMARKS				OBLIGATION REF. NO.		CHARGE ALLOTMENT NO.
				SIGNATURE		

FORM 1273
5-60

OBsolete PREVIOUS EDITIONS

SECRET

(10-43)

MRD COPY

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE 237949 MAR 162

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE			OFFICE/COMPONENT
	LAST	FIRST	MIDDLE	
1. 3	(Print)	0. 23		24-28 64 <i>[Signature]</i>

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1. PCS (Basic)	26	27-28	29-30	31-32	33-34	35-36	37-38		39-41
2. CORRECTION									
3. CANCELLATION									

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2. TDY (Basic)	26	27-28	29-30	31-32	33-34	35-36	37-38		39-41
4. CORRECTION									
5. CANCELLATION									
		2	6	62	13	62		WTH	811

SOURCE OF RECORD DOCUMENT

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

6-13 Jan 62

REMARKS

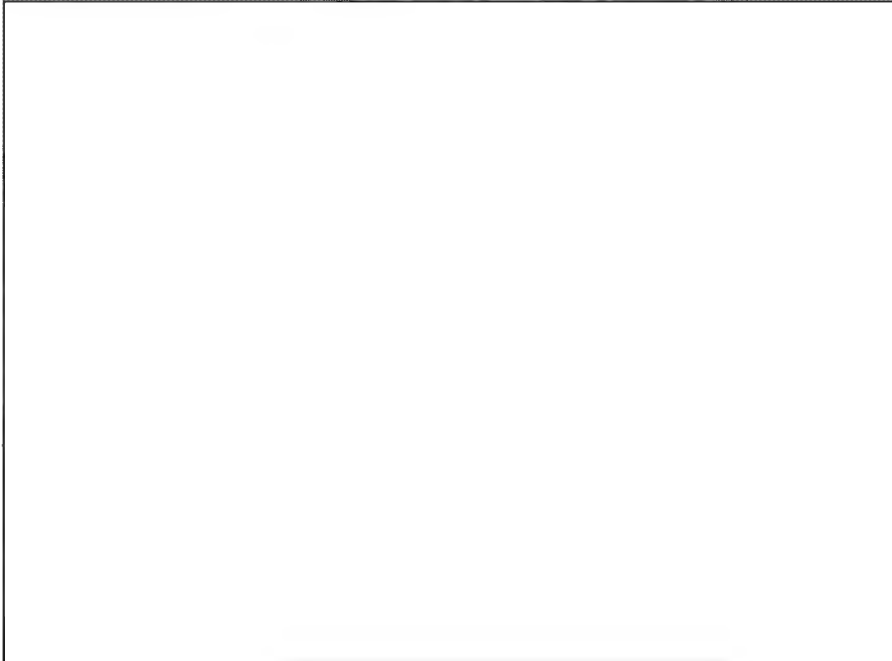
5/4/62. *[Signature]*

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDITIONAL DATA VERIFIED CORRECT. BASED UPON SOURCE DOCUMENT CITED
FISCAL DIVISION	DATE	SIGN
FINANCE DIVISION	5 March 62	

SECRET

3 1970

MEMORANDUM FOR: Chief, FE/PLA



SECRET

LB/P 2-0080

CONFIDENTIAL

8 January 1962

MEMORANDUM FOR: [REDACTED]

SUBJECT : Commendation for Services Performed in
Connection with [REDACTED]
[REDACTED]

1. It gives me a great deal of personal pleasure to commend you on the high degree of competence and devotion to duty you displayed in connection with [REDACTED]

[REDACTED] The professionalism you demonstrated in planning for and during the President's visit contributed to the outstanding success of his trip.

2. A copy of this memorandum is being made a matter of record in your personnel file.

[REDACTED]
RICHARD M. BISSELL, JR.
Deputy Director
(Plans)

CONFIDENTIAL

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:

Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO. 1-8	NAME OF EMPLOYEE			OFFICE/COMPONENT 29-28
	LAST (Print)	FIRST 7-24	MIDDLE	
				57

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1. PCS (Basic)	27	29-29	30-31	32-33	34-35	36-37	38-39		40-42
2. CORRECTION					03	27	60		575
3. CANCELLATION									

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1. TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
2. CORRECTION									
3. CANCELLATION									

SOURCE OF RECORD DOCUMENT

TRAVEL VOUCHER	1	DISPATCH
CABLE		DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)		

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	20 MAR 60

REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE
FISCAL DIVISION	DATE	SIGNATURE
FINANCE DIVISION	4/20/60	

FORM 1451a OBSOLETE PREVIOUS EDITIONS.

SECRET

(4-10)

~~Secret~~

COMMENDATION

[Redacted]

3. It is requested that this commendation be made a part of his personnel record.

[Redacted]

Signed by:

[Redacted]

7 May 1959

Secret

CONFIDENTIAL
(When Filled In)

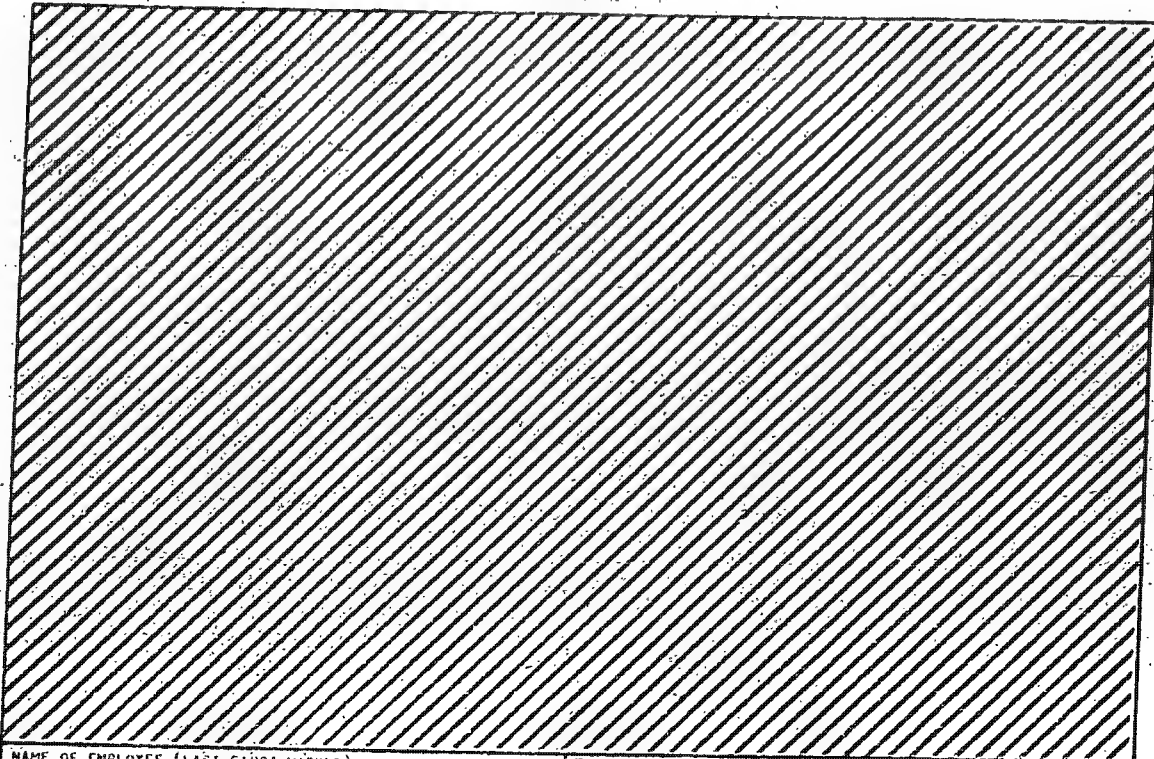
TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 24 months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.
2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.
3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

Date: 4 Feb 58

SECRET
(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)

[Redacted]

DATE OF BIRTH

unk

PAGE OR CLAIM NUMBER

56-255

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on January 1955.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE

22 Aug. 1957

SIGNATURE OF RCD RE.

[Redacted Signature]

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

FEIS



CENTRAL INTELLIGENCE AGENCY
WASHINGTON 25, D. C.

OFFICE OF THE DIRECTOR

3 APR 1955

MEMORANDUM FOR:

SUBJECT: Notification of Membership in the Career Staff

1. On behalf of the Director of Central Intelligence, it gives me pleasure to inform you that your application for membership in the Career Staff has been accepted by the CIA Selection Board. The effective date of your membership is 17 September 1954.

2. Please indicate that you have received this notification by signing in the space provided below and return it to the Head of your Career Service. He will forward it to the Executive Director of the CIA Selection Board.

3. Because your membership in the Career Staff is classified information, it is necessary that this notification be conveyed to you in this manner. The application for membership which you signed has been endorsed on behalf of the Director of Central Intelligence by the Executive Director of the CIA Selection Board and placed in your permanent Official Personnel Folder.

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE

Chairman, CIA Selection Board

Noted:

Date: 13 July 1955

Career Service Staff
Office of Personnel

20 JUL 1955

SECRET

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SECURITY INFORMATION

27 May 1952

MEMORANDUM FOR: D/FE/PC

SUBJECT: [REDACTED]

[REDACTED]

3. In difficulty and in seriousness of approach, this series of conferences corresponded to an advanced graduate course in an American university. It was a mixture of the seminar and lecture techniques.

4. [REDACTED] immediately made himself one of the outstanding participants of the group. He brought the capacity of a reflective and richly educated mind to this new field and demonstrated a real talent for seeing the opportunities presented by novel and unconventional methods of attack upon Communism. Not only did [REDACTED] learn a great deal himself; he contributed substantially to the intellectual participation of the other members of the conferences in the common tasks.

[REDACTED]
Consultant to FE/PC

FE/PC: [REDACTED]

Distributions:

D/FE/PC, Original
FE Personnel
CIA Personnel

SECRET

SECRET
Security Information

[Redacted]
Name: Last, First Middle

CODED

FOR

QUALIFICATIONS

DATE 21 Aug 52

TO: All C. I. A. Personnel

FROM: Personnel Director

SUBJECT: PERSONNEL QUALIFICATION QUESTIONNAIRE

1. The Agency is currently revising the system for machine coding employee qualifications, thereby permitting more complete and accurate data on all personnel. The new system will aid in implementing Agency policies on promotion from within by facilitating the selection of personnel with desired education and experience for vacancies which may occur. It is also expected that the new system will provide readily accessible statistics for planning and management purposes.

2. The attached questionnaire is designed to cover adequately those factors in which the Agency is interested. Although the information is, in a large measure, already reflected in previous forms submitted by you, it is felt that your time within the organization may enable you to emphasize those qualifications pertinent to its needs. The questionnaire also serves to bring your education and qualifications record up to date.

3. Your cooperation is requested in completing the questionnaire as thoroughly and accurately as possible and returning it to your Administrative Officer within the time allotted.

[Redacted]
Personnel Director

SECRET
Security Information

SECRET
Security Information

SECRET
Security Information

PERSONNEL QUALIFICATION QUESTIONNAIRE

1. Serial No.	2. NAME: (last) (first) (middle)			3. Office	
				Ope (FE)	
4. Date of Birth	5. Sex: <input checked="" type="checkbox"/> male <input type="checkbox"/> female (2)	6. CIA Entry Date:			
		Nr. Dependents <u>2</u>		17 Sept 1951	
7. Citizenship:	8. Acquired By: (1) <input checked="" type="checkbox"/> Birth (2) <input type="checkbox"/> Marriage (3) <input type="checkbox"/> Naturalization				
<input checked="" type="checkbox"/> U.S. <input type="checkbox"/> Other	(4) <input type="checkbox"/> Other (specify) Year U.S. citizenship acquired, if not by birth				

SEC. I. EDUCATION

1. Extent: (circle one)

1. Less than high school	4. Two years college, or less	8. <input checked="" type="checkbox"/> Masters degree
2. High school graduate	5. Over two years, no degree	9. Doctors degree
3. Trade, Business or Commercial school graduate	6. Bachelor degree	
	7. Post-graduate study (minimum 8 sem. hrs.)	

2. College or University Study:

Name and location of College or University	Major	Minor	Dates att'd		Yrs Compl		Degree Recd		Sem Hrs
			From	To	Day	Night	Title	Date	
Harvard University Cambridge, Mass.	History	Govt.	1940	43	3		AB	1943	120
Yale University New Haven, Conn.	FE Politics	Japan	1943	1944	1				36
Johns Hopkins Baltimore, Md.	Govt.		1947	1948	1				6
University of Penna. Philadelphia, PA.	History	Pol. Sci.	1948	1951	3		MA	1950	134

3. Trade, Commercial, and Specialized Training:

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	
U. of Michigan Ann Arbor, Mich.	1944	1945	9	Japanese
St. S. Halling Minneapolis, Minn.	1945	1945	04	Japanese, Intelligence

4. Military or Intelligence Training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, command & staff, etc.)

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	
This entry should have been made here, I suppose				

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SEC. II. WORK EXPERIENCE

1. CIA Experience: State the specific nature of duties performed with CIA and CIC, starting with your present position. Take position titles from your official personnel papers, if you have personal copies. Please do not request your Official Personnel Folder. Include geographic area and subject matter dealt with, if applicable. Position Title is your classification title such as Geographer, Intelligence Officer, etc. Duty Title indicates your organization position such as - Section Chief, Branch Chief, Administrative Assistant, etc., and is to be filled in only if different to the Position Title. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.

From <u>1951</u> To <u>1952</u> Tot. mos. <u>10</u>	Description of Duties: <u>ASSIST IN PLANNING OF SRA OBJECTIVES AND COUNTRY PLANS</u>
Grade <u>11</u> Salary <u>5940</u>	<u>ASSIST DESK OFFICERS IN WRITING PROJECTS IN POLITICAL AND PSYCHOLOGICAL WARFARE</u>
Office <u>Opc (FE)</u>	<u>COORDINATE FE MATTERS WITH ADPC'S STAFF AND WITH OTHER AGENCIES AND DEPT.</u>
Position <u>Operations Officer</u>	<u>ASSIST IN WRITING PSR PLANS</u>
Duty <u>Psy War and Pol Warfare</u>	Duty Station, if overseas:
Title: <u>Advisor For SEA</u>	
From _____ To _____ Tot. mos. _____	Description of Duties: _____
Grade _____ Salary _____	
Office _____	
Position _____	
Title: _____	
Duty _____	
Title: _____	Duty Station, if overseas: _____
From _____ To _____ Tot. mos. _____	Description of Duties: _____
Grade _____ Salary _____	
Office _____	
Position _____	
Title: _____	
Duty _____	
Title: _____	Duty Station, if overseas: _____
From _____ To _____ Tot. mos. _____	Description of Duties: _____
Grade _____ Salary _____	
Office _____	
Position _____	
Title: _____	
Duty _____	
Title: _____	Duty Station, if overseas: _____

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Security Information

SEC. II. WORK EXPERIENCE (CONT'D.)

2. Other than CIA: (Describe work experience for the last 15 years in sufficient detail to permit specific coding of your qualifications. Include military work experience. List last position first.)

From <u>1946</u> To <u>1957</u> Tot. mo's <u>63</u> Classification Grade(if in Federal Service) _____ Salary <u>3600</u> Number and Class of Employees _____ Supervised: <u>150 students (ad.)</u> Employer <u>Dickinson College</u> Kind of Business or organization (i.e., paper products mfr, public utility) <u>College</u>	Exact Title of your position <u>Asst. Prof. of History</u> Description of Duties: <u>Teach 14 hrs history weekly, including For Eastern, American, European (middle ages) (general survey)</u> Duty Station if overseas: _____
From <u>1943</u> To <u>1946</u> Tot. mo's <u>35</u> Classification Grade(if in Federal Service) <u>T/S</u> Salary <u>90 per mo.</u> Number and Class of Employees _____ Supervised: _____ Employer _____ Kind of Business or organization (i.e., paper products mfr, public utility) <u>U.S. Army (MIS)</u>	Exact Title of your position _____ Description of Duties: <u>Japanese language specialist</u> Duty Station if overseas: _____
From _____ To _____ Tot. mo's _____ Classification Grade(if in Federal Service) _____ Salary _____ Number and Class of Employees _____ Supervised: _____ Employer _____ Kind of Business or organization (i.e., paper products mfr, public utility) _____	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____
From _____ To _____ Tot. mo's _____ Classification Grade(if in Federal Service) _____ Salary _____ Number and Class of Employees _____ Supervised: _____ Employer _____ Kind of Business or organization (i.e., paper products mfr, public utility) _____	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____
From _____ To _____ Tot. mo's _____ Classification Grade(if in Federal Service) _____ Salary _____ Number and Class of Employees _____ Supervised: _____ Employer _____ Kind of Business or organization (i.e., paper products mfr, public utility) _____	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____

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SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

- | | |
|--|--|
| 01 <input type="checkbox"/> U.S. Secret Service | 24 <input type="checkbox"/> Air Force A-2 |
| 02 <input type="checkbox"/> Civil Police | 25 <input type="checkbox"/> Foreign Economic Admin. |
| 03 <input type="checkbox"/> Military Police | 26 <input type="checkbox"/> Counter Intelligence Corps |
| 04 <input type="checkbox"/> U.S. Border Patrol | 27 <input type="checkbox"/> Immigration & Naturalization |
| 05 <input type="checkbox"/> U.S. Narcotics Squad | 28 <input type="checkbox"/> Strategic Services Unit |
| 06 <input type="checkbox"/> FBI | 29 <input type="checkbox"/> Foreign Service, State Dept. |
| 07 <input type="checkbox"/> Criminal Investigation Div. | 30 <input type="checkbox"/> Central Intelligence Group |
| 21 <input type="checkbox"/> Office of Naval Intelligence | 31 <input type="checkbox"/> Armed Forces Security Agency |
| 22 <input type="checkbox"/> Office of War Information | 32 <input type="checkbox"/> Coordinator of Information |
| 23 <input checked="" type="checkbox"/> Army G-2 | 33 <input type="checkbox"/> Office of Facts & Figures |
| 20 <input type="checkbox"/> Office of Strategic Services | 34 <input type="checkbox"/> Board of Economic Warfare |
| | 35 <input type="checkbox"/> Federal Communications Comm. |

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE	COMPETENCE					HOW ACQUIRED				
	Equivalent to Native Fluency *	Fluent but obviously Foreign *	Adequate for Research **	Adequate for Travel	Limited Knowledge	Native of Country	Prolonged Residence	Contact (Parents, etc.)	Academic	Study (inc. CIA training)
Japanese				X						X

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein. I have sufficient spoken Japanese for Category #2 (above) but my knowledge of written Japanese needs more extensive review.

**Specialized Language Competence: Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality. _____

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SEC. IV. AREA KNOWLEDGE

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

Country or Region	Dates of Residence, Study Etc.	Manner in Which Knowledge Was Acquired (check (X) one)		
		Residence	Travel	Study
JAPAN				
CHINA				X
MAINLAND SEA				X
				X

2. Specialized Knowledge of Area
List specialized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

Country	Type of Knowledge	How and When Gained

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION) *N/A*

Skill	Per. Cent of Time Used	Not Used	WPM (Approximate Proficiency)	Prefer Assignment Using Skill Oftener
Typing	1.	2.		1. Yes 2. No
Shorthand	1.	2.		1. Yes 2. No
Shorthand System: 1. Manual 2. Machine 3. Speedwriting.				

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc. <i>None</i>	2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications. <i>Writing</i>

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

List any professional or academic associations or honorary societies in which you hold membership. <i>AMERICAN HISTORY ASSN.</i>
<i>AMERICAN ASSN. OF UNIVERSITY PROFESSORS</i>

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SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction: professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of published materials of which you were author or co-author.

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

Device	Patented			
	(1)	Yes	(2)	No
<i>None</i>	(1)	Yes	(2)	No
	(1)	Yes	(2)	No
	(1)	Yes	(2)	No

SEC. X. CIA TESTS

Describe below the type of tests which you have taken in CIA:

Type of Test	Date Taken
<i>None</i>	

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

<i>None</i>

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

(1) 2 year Tour <i>X</i>	(2) 4 year Tour <i>X</i>	(3) Not interested
--------------------------	--------------------------	--------------------

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment in CIA do you think you are best qualified?

<i>Work on psychological and political warfare matters</i>
<i>related to the Far East, at headquarters or in the field, in</i>
<i>a planning and/or supervisory capacity.</i>

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SEC. XIV. MILITARY STATUS

1. Present Draft Status Have you registered under the Selective Service Act of 1948? <u>Yes</u> <input checked="" type="checkbox"/> <u>No</u> <input type="checkbox"/> If yes, indicate your present draft classification _____		
2. Present Reserve or National Guard Status Do you now have Reserve or National Guard Status <u>Yes</u> <input checked="" type="checkbox"/> <u>No</u> <input type="checkbox"/> If yes, complete the following: 1. <u> </u> National Guard 2. <u> </u> Air National Guard 3. <u> </u> Active Reserve Status (member of organized unit) 4. <u> </u> Inactive Reserve Status		
Service _____	Grade _____	Location _____
Reserve Unit with which currently affiliated _____		
Service Mobilization Assignment, if any _____		
Location of Service Records, if known _____		

SEC. XV. CIA TRAINING

List the training courses or subjects you have taken while in the CIA.

Course or Subject	(from) Dates	(to)	Hours
<i>None</i>			

SEC. XVI. REMARKS

Use this space to indicate any other qualifications you may have which you do not describe above.

<i>From 15 JAN 1952 to 15 MAY 1952, I attended a seminar in psychological warfare given by an AF Division consultant, a professor at SAIS.</i>

DATE 24 June 1952

SIGNATURE Joseph B. Smith

SECRET
Security Information

CONFIDENTIAL

Classified by category
X-V

PLEASE READ INSTRUCTION SHEET BEFORE PREPARING THIS FORM

STATEMENT OF FEDERAL CIVILIAN AND MILITARY SERVICE				OFFICE		DIVISION		
Smith, Robert Sinkholder				CIC		ES		
				BRANCH		SECTION		
				F-31		IV		
I. FEDERAL CIVILIAN SERVICE (BEGIN WITH THIS AGENCY AND FOLLOW IN REVERSE CHRONOLOGICAL ORDER)								
AGENCY	LOCATION	FROM			TO			TOTAL SERVICE
		DA.	MO.	YR.	DA.	MO.	YR.	
Central Intelligence Agency	Washington, D.C.	17	9	1941	31	12	51	15 3 -
Total Civilian Service							15	3
II. MILITARY SERVICE (INCLUDE ONLY PERIODS OF ACTIVE DUTY; DO NOT INCLUDE TERMINAL LEAVE)								
BRANCH OF SERVICE	FROM			TO			TOTAL SERVICE	
	DA.	MO.	YR.	DA.	MO.	YR.		
U.S. Army	11	3	1943	24	2	1946	14 11 2	
Total Military Service							14	11 2
III. CERTIFICATION								
I hereby certify that the above Civilian and Military service is complete and accurate to the best of my knowledge.								
<div style="display: flex; justify-content: space-between;"> <div> DATE: 10-1 1951 </div> <div style="border: 1px solid black; width: 150px; height: 30px;"></div> </div>								
IV. REMARKS: (COMMENTS AND SERVICE)				V. FOR PERSONNEL OFFICE USE ONLY				
<div style="text-align: center;"> or 6/2/51 C-6 </div>				TOTAL CREDITABLE SERVICE				
				DAYS		MONTHS		YEARS
				29		2		3
<div style="text-align: center;">C-6</div>								

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointees

CIA

(Department or agency)

(Bureau or division)

Washington, D. C.

(Place of employment)

I, , do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, **SO HELP ME GOD.**

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

17/9/51
(Date of entrance on duty)

Subscribed and sworn before me this 17 day of September, A. D. 1951,

at Washington, D. C.
(City) (State)

[SEAL]

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

		FILE NO.	

THE PAST IS WORTHY? ☐ YES ☒ NO

If so, list each such relative in the blanks below. If additional space is necessary, complete under item 10.

<small> If (1), fill in each space relative to the address below. If additional space is necessary, complete under item 10. If (2), fill in each space relative to the address below. If additional space is necessary, complete under item 10. </small>					
NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION - (2) EMPLOYER OR NOT (1) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATURAL SHOP	DATE FILED (Check one)	SIGNATURE
1. NAME		1. 2. 3.			
2. NAME		1. 2. 3.			
3. NAME		1. 2. 3.			
4. NAME		1. 2. 3.			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS
1. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?		X			WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
2. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?			X		
If your answer is "Yes", give details in Item 10.					
3. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY PENSION PLAN AND/OR ANY PENSION LAW AND/OR COMPENSATION FOR MILITARY OR NAVAL SERVICE?			X		
If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of involuntary or voluntary retirement after 5 years' service; amount of retirement pay; and under what retirement act; and rating, if retired from military or naval service.					
4. SINCE YOU FILED APPLICATION PERTAINING TO THIS EMPLOYMENT HAVE YOU BEEN VOLUNTARILY OR COMPELLED TO RESIGN FOR DISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?			X		
If your answer is "Yes", give in Item 10 the name and address of employer, date and reason in each case.					
5. HAVE YOU BEEN ARRESTED SINCE INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED \$100 OR LESS OR FORTY-FIVE DAYS OR MORE OF YOUR LOCAL LAW? THIS FILED APPLICATION PERTAINING TO THIS EMPLOYMENT?			X		
If your answer is "Yes" then fill out each case under Item 10. Give in each case: (1) the date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case; if appropriate, your fingerprints will be taken.					

INSTRUCTIONS TO APPOINTING OFFICER

2. The undersigned officer below signed this foregoing certificate under oath and in view of the above recitation that this appointment would be in compliance with the Civil Service Act, approved April twenty three, 1908, and by statute and acts of Congress pertaining to appointments.

That have signed the above for the District of Columbia, however, especially to cover the same with any remedy of record otherwise as above, and previously for the District.

14) feasibility of measures and in this duty the participating states in part depend on the extent and the degree to which the measures are accepted by the entire public and administrative authorities. The participating states will determine who is to participate with the production of the relevant technical plans. If the measures mentioned in 13) are not feasible, the participating states will determine the extent to which the measures are to be implemented. The participating states may be charged against the national production. The participating states may be charged with the production of the goods and services.

(7) Age and gender limits have been established for the purpose of determining the applicant is not suitable for the age group of 18 years of age. In each determination made, the applicant's age will be considered.

(1) Conservation - The engineering effort is responsible for preserving the historical monument and the Great Smoky Mountains and (2) Recreation - acts. Work of maintenance and preservation for local programs and is a separate part of maintenance work in the absence of conservation concerns. In doubtful cases the engineering department must be consulted and a decision has been reached from the existing value of the Great Smoky Mountains.

(b) The members of the Committee (Benson, D. and the Chief Justice) had concluded that the Government had already done the proper work of a fact-finding body. The Government had presented a preliminary report to the committee in January of 1970 and had taken a number of steps to deal with the educational and governmental aspects of the computer system. The Government had presented a preliminary report to the committee in January of 1970 and had taken a number of steps to deal with the educational and governmental aspects of the computer system. The Government had presented a preliminary report to the committee in January of 1970 and had taken a number of steps to deal with the educational and governmental aspects of the computer system.

SECRET

(When Filled In)

MEDICAL ACTION REQUEST AND REPORT

I REQUEST FOR PHYSICAL EXAMINATION BY

GID

NAME (Last)

(First)

(Initials)

2. DATE

25 July 1956

3. GRADE

GS-13

4. TYPE OF POSITION

☐ Departmental

☐ U.S. Field

☐ Overseas

5. EVALUATE FOR

☐ IDP

☐ Unpress

☒ Returned

☐ Pre-Employment

☐ Annual

☐ Special (Specify)

II REPORT OF MEDICAL EVALUATION

☐ Qualified for Full Duty (General)

☐ Qualified for Departmental Duty Only

☐ Qualified for Full Duty (Special)

☐ Disqualified

Remarks: Subject is qualified for Departmental Duties (8/3/56).
May be re-evaluated on request.

SECRET

MEDICAL OFFICE

MEDICAL ACTION REQUEST AND REPORT

I REQUEST FOR PHYSICAL EXAMINATION BY PERSONNEL DIVISION (☐ OVERT ☒ COVERT) (☒ ISR ☐ CSE)

NAME (Last)

(First)

(Initials)

2. DATE

2 Dec. 53

3. TO POSITION

Intell. Off.

4. TYPE OF POSITION

☐ Departmental

☐ U.S. Field

☒ Overseas

5. OFFICE, DIVISION, BRANCH

DDP/FE

6. EVALUATE FOR

☐ IDP

☒ Overseas

☐ Returned

Transfer of funds.

☐ Pre-Employment

☐ Annual

☐ Special (Specify)

II REPORT OF MEDICAL EVALUATION

☐ Qualifying for Full Duty (General)

☐ Qualified for Departmental Duty Only

☐ Qualified for Full Duty (Special)

☐ Disqualified

Remarks: Transfer of funds from Vouchered to Unvouchered.

Return to Wing 1-J, Curie Hall

S. had exam 3-30-53 and found qualified for Full duty/General
12-9-53.

MEDICAL OFFICE

FORM NO. 37-115
MAY 1950

TO: Medical Division
FROM: Transactions & Records
SUBJECT:

Request that above named subject be given a physical examination.

POSITION: Intelligence Officer

GRADE: GS-9

BRANCH: OPS

SERVICE: Departmental

NATURE OF APPOINTMENT: Exc.

FORM NO. 37-115
MAY 1950

DR.

JBT
9/17/51

PHYSICAL QUALIFICATION RECORD

NAME <div></div>	NATURE OF ACTION BOD
TITLE OF POSITION I.C.	GRADE GS-9
DEPARTMENT OR FIELD Department	

Subject was found physically ☒ fit ☐ unfit for duty with this organization in the above grade and position.

RECOMMENDATIONS:

17 Sept 1971

DATE

SIGNATURE OF

PHYSICAL REQUIREMENTS OFFICER

CONFIDENTIAL

FITNESS REPORT				NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A GENERAL INFORMATION							
1. EMPLOYEE NUMBER		2. NAME (last, first, middle)		3. DATE OF BIRTH		4. SEX	5. GRADE
						M	GS-14
7. OFFICIAL POSITION TITLE				8. OFF/DIV/BR OF ASSIGNMENT		9. CURRENT STATION	
Ops Officer				DDO/WH/1			
10. TYPE OF APPOINTMENT				11. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE		<input type="checkbox"/> ANNUAL	<input type="checkbox"/> 21-MONTH	<input type="checkbox"/> 30-MONTH	<input type="checkbox"/> REASSIGNMENT
<input type="checkbox"/> CONTRACT				<input type="checkbox"/> SPECIAL			
<input type="checkbox"/> TEMPORARY				<input type="checkbox"/> RETIREMENT			
12. REPORTING PERIOD (From-to)				13. DATE REPORT DUE IN O.P.			
1 Nov 72 - 30 June 73							
SECTION B PERFORMANCE EVALUATION							
<p><u>U—Unsatisfactory</u> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><u>M—Marginal</u> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><u>P—Proficient</u> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><u>S—Strong</u> Performance is characterized by exceptional proficiency.</p> <p><u>O—Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1							RATING LETTER
							S
							RATING LETTER
							S
							RATING LETTER
							S
SPECIFIC DUTY NO. 2							RATING LETTER
							S
							RATING LETTER
							S
							RATING LETTER
							S
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
							S

FORM 45N

CONFIDENTIAL

E2 IMPDET CL BY 007622

8 AUG 1973

CONFIDENTIAL

SECTION C		NARRATIVE COMMENTS							
<small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to justify basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</small>									
<p>Subject will retire effective 80 June 1973 thus this will be his final agency Fitness Report. Subject's performance at this Station, during the past four years, has always been consistently strong. Subject has primarily concentrated his attention on [redacted] He has done very well at developing contacts [redacted] and we have taken advantage of this ability.</p> <p>Subject is responsive to guidance and direction and has an excellent grasp and understanding of local politics and its over changing profile. Subject is a mature seasoned officer who will be missed at this Station. His departure for retirement will be most felt in the area of his specialization.</p>									
SECTION D									
CERTIFICATION AND COMMENTS									
<p>1. BY EMPLOYEE</p> <p align="center">I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%; padding: 5px;">DATE 29 22 June 1973</td> <td style="width:65%; padding: 5px;">SIGNATURE OF EMPLOYEE /s/ [redacted]</td> </tr> </table>				DATE 29 22 June 1973	SIGNATURE OF EMPLOYEE /s/ [redacted]				
DATE 29 22 June 1973	SIGNATURE OF EMPLOYEE /s/ [redacted]								
<p>2. BY SUPERVISOR</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%; padding: 5px;">MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 48</td> <td colspan="2" style="width:65%; padding: 5px;">IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</td> </tr> <tr> <td style="padding: 5px;">DATE 29 22 June 1973</td> <td style="width:35%; padding: 5px;">OFFICIAL TITLE OF SUPERVISOR DCOS</td> <td style="width:30%; padding: 5px;">TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]</td> </tr> </table>				MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 48	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		DATE 29 22 June 1973	OFFICIAL TITLE OF SUPERVISOR DCOS	TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 48	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION								
DATE 29 22 June 1973	OFFICIAL TITLE OF SUPERVISOR DCOS	TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]							
<p>3. BY REVIEWING OFFICIAL</p> <p>COMMENTS OF REVIEWING OFFICIAL</p> <p>In writing a comment on his Fitness Report in January 1973, I spoke of what a loss he will be to the Station. Because of overlap problems, he will have retired soon after the new COS arrives and before the new DCOS has come. It is typical of him that he has offered to perform introductions to some of his contacts even after retirement. He will be</p> <p>[redacted]</p> <p>[redacted]</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%; padding: 5px;">DATE 22 22 June 1973</td> <td style="width:35%; padding: 5px;">OFFICIAL TITLE OF REVIEWING OFFICIAL COS</td> <td style="width:30%; padding: 5px;">TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]</td> </tr> </table>				DATE 22 22 June 1973	OFFICIAL TITLE OF REVIEWING OFFICIAL COS	TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]			
DATE 22 22 June 1973	OFFICIAL TITLE OF REVIEWING OFFICIAL COS	TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]							

CONFIDENTIAL

SECRET
(When Filled In)

11C

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I

BIOGRAPHIC AND POSITION DATA

EMP. SER. NO.	DATE OF BIRTH
---------------	---------------

SECTION II

EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------	--------------------------------	--------------------------	--

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED (FROM-TO)	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/QU. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

SECTION III

MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:

2. NAME OF SPOUSE (Last) (First) (Middle) (Initial)

3. DATE OF BIRTH 4. PLACE OF BIRTH (City, State, Country)

5. OCCUPATION 6. PRESENT EMPLOYER

7. CITIZENSHIP 8. FORMER CITIZENSHIP(S) COUNTRY(IES) 9. DATE U.S. CITIZENSHIP ACQUIRED

SECTION IV

DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				

FORM 444a
2-66

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

6 & 8 SEP 66

(4-91)

SECRET

(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY:	CHECK LIST		
				TRAVEL	STUDY	OTHER	
	politics, sociology	Jun. 62-Aug 66	APR 12 1968	X	X		X
		Jun 64			X		

SECTION VI TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (SPW)	2. SHORTHAND (SPW)
3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM	
<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING
<input type="checkbox"/> STENOGRAPHY	<input type="checkbox"/> OTHER SPECIFY:

SECTION VII SPECIAL QUALIFICATIONS	
PROVIDE INFORMATION ON Hobbies, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.	

SECTION VIII MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION
<input type="checkbox"/> YES <input type="checkbox"/> NO	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON
MILITARY RESERVE, NATIONAL GUARD STATUS	
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK
3. EXPIRATION DATE OF CURRENT OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (Active) <input type="checkbox"/> STANDBY (Inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED	
5. MILITARY MODIFICATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)	
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION
DATE COMPLETED	
<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED	

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS		
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP
		FROM TO

SECTION X REMARKS	
No updating necessary for portions not filled in.	

DATE	SIGNATURE
9 April 1968	

(WHEN CALLED IN)

QUALIFICATIONS SYSTEM RECORD CHANGE									
APPLICANT CODING DATA									
1. ID		2. APPL. NO. 6-DIGITS		3. NAME MUST CONTAIN 20-DIGITS					
4. DATE OF BIRTH		5. DATE CODED		THE DATA ABOVE (ITEMS 2 THRU 5) WILL BE FILLED IN WHEN CODING AN APPLICANT FOR THE FIRST TIME. THIS FORM IS THEN ATTACHED TO FORM 1962, MASTER QUALIFICATIONS CODING RECORD.					
MO	DA	YR	MO						

LANGUAGE CODING DATA - FORM 444c														
1. ID		2. EMPLOYEE NO.		3. NAME		4. LANGUAGE DATA CODE								
< 3 •				3-LETTERS •		BASE CODE •		R	W	P	S	U	T	YR
5. DATE SUBMITTED						6. DATE OF BIRTH				WHEN FORM 444c DENOTES NO. LANGUAGE COMPETENCE, ENTER THE FOLLOWING IN ITEM 4: "NO+LANGUAGE" (12-DIGITS)				
MO		DA		YR		MO		DA				YR		
•						•								

LANGUAGE PROFICIENCY TEST DATA														
1. ID	2. EMPLOYEE NO.	3. NAME	4. CODE	5. LANGUAGE DATA BEFORE TEST										
		3-LETTERS	C-A-D	BASE CODE	R	W	P	S	U	T	YR			
5	447894	SMI	C	BL18	4	3	4	4	4	4	63			
6. LANGUAGE DATA AFTER TEST				7. DATE OF TEST			DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1273. LANGUAGE PROFICIENCY AWARDS DATA.							
BASE CODE	R	W	P	S	U	T						YR	MO	DA
BL18	H	3	I	I	H	4	67	4	13	167				

[illegible]


SECRET

(4-22)

SECRET

(WHEN FILLED IN)

CERTIFICATION OF LANGUAGE PROFICIENCY

1. EMPLOYEE NO.		2. NAME (LAST-FIRST-MIDDLE)		3. TYPE CHANGE		4. LANGUAGE DATA PRIOR TO TEST								
				A=ADD C=CHANGE D=DELETE		CODE	LAN. CODE	R	W	P	S	U	I/T	YEAR
5. LANGUAGE DATA AFTER TEST				6. DATE TESTED		7. DATE OF BIRTH		8. GRADE		9. OFFICE OR DIVISION				
LAN. CODE	R	W	P	S	U	I/T	YEAR	04/13/67				14		OTR
NOTICE TO PERSON TESTED														
10. ON THE DATE SHOWN IN ITEM 6 ABOVE, YOU WERE TESTED IN <u>SPANISH (NEW WORLD)</u> <u>BL18</u> AND YOUR TEST SCORES ARE AS FOLLOWS: (NAME OF LANGUAGE)														
READING		WRITING		PRONUNCIATION		SPEAKING		UNDERSTANDING		TEST RATINGS				
H		+		I		I		H		Q = ZERO I = INTERMEDIATE S = SLIGHT H = HIGH E = ELEMENTARY N = NATIVE				
11. REMARKS										12. SIGNATURE				
CODED FOR QUALIFICATIONS DATE 19 JUN 1967										 13. LD NUMBER 13652				

FORM 11-64

1273

OBsolete PREVIOUS EDITIONS

(10-50)

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

1 - OP/QAB

SECRET

OFFICIAL USE ONLY

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I				
1. LAST NAME, FIRST NAME		2. GRADE (See Form 100-10)		3. DATE OF BIRTH
[REDACTED]		[REDACTED]		4. DATE OF BIRTH
5. POSITION TITLE		6. OFFICE OF ASSIGNMENT		7. LOCATION (Country, City)
D INSTR OPERATIONS		OTR		WASH., D.C.

SECTION II			
AGENCY OVERSEAS SERVICE			
1. TYPE OF SERVICE	2. FROM		3. TO
	DATE	DATE	DATE
[REDACTED]	TDY	56	53/08/01
	PCS	56	54/03/01
	PCS	56	58/03/01
	PCS	56	62/06/01
			53/08/01
			56/06/01
			60/03/01
			66/05/01

OVERSEAS DATA

CODED

DATE:

INITIALS:

14 Jun 67

[REDACTED]

SECTION III			
EDUCATION			
1. DEGREE	2. MAJOR FIELD	3. COLLEGE	4. YEAR
MASTERS	HISTORY, GENERAL	HARVARD UNIV MASS	48
BACHELORS	HISTORY, GENERAL	PA UNIV	50

SECRET

67 JUN ENTD

SECRET

(When Filled In)

SECTION IV		GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL				KNOWLEDGE ACQUIRED BY -- CHECK --			
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	RES. DEGREE	TRAVEL	STUDY	WORK ASSIGNMENT		
	political, cultural		VALE 1942-44			X			
	political, cultural		VALE 1943-44			X			
	political, cultural		1951-53, WASH DC				X		
	political, cultural		1951-53, WASH DC				X		
	political, cultural		1951-53, WASH DC				X		
	political, industrial, cultural	1953	1953-54 WASH DC	X			X		
	political, cultural	1954-56	1956-58 WASH DC	X			X		
	political, cultural	1958-1960		X			X		
	political, cultural	1960-1961	1960-1961 WASH D.C.				X		
	political, cultural	1962-1966		X			X		

SECTION V				TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED -- CHECK IN APPROPRIATE ITEM			
		<input type="checkbox"/> GREGG <input type="checkbox"/> PENCINING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFIC			
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (computer, mimeograph, card punch, etc.)					

SECTION VI		SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.			
2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES, SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, coding & keying), OFFSET PRESS, TURRET LATHE, ETC AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.			
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOTO ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ATTENDED "SCHOOL" IN ANY AREA, INDICATE FIELD OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number if known.)		5. FIRST LICENSE/CERTIFICATE (year of issue)	
Civil Service Training School, 1950-1951, Federal Bureau of Investigation, Washington, D.C. See PHS		6. LATEST LICENSE/CERTIFICATE (year of issue)	
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (do not submit copies unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING: non-fiction or scientific articles, general interest material, novels, short stories, etc.)			
See PHS			
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED			
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE			
See PHS			

SECRET

(When filled in)

MARRITAL STATUS

No CHANGE

DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME _____

PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

NAME AND CHAPTER

CASE

SECRET

27 April 1962

MEMORANDUM FOR: Chief, Contract Personnel Division
ATTENTION : Staff Agents Branch
FROM : Chief, Personnel Security Division
SUBJECT : [REDACTED]

1. Reference is made to your memorandum dated 26 April 1962
[REDACTED]

2. This is to advise that [REDACTED] is granted for the use of the Subject, as described in your request as set forth in paragraph 1, above.

3. If your office should desire at a later date to change the status or use of this individual, a request to cover any proposed change should be submitted to this office.

4. This clearance becomes invalid in the event the Subject's services are not utilized within six months of the date of this memorandum.

FOR THE DIRECTOR OF SECURITY:

[REDACTED]

SECRET

SECRET
(When Filled In)

REQUEST FOR SECURITY CLEARANCE

NAME (LAST, FIRST, MIDDLE) [REDACTED]		POSITION NUMBER (31-35) [REDACTED]		OCCUP. CODE (37-42) [REDACTED]		REQUEST NO. (1-5) [REDACTED]
POSITION TITLE Ops Officer		ASSIGNMENT (OFFICE, DIVISION, BRANCH) DDP/WH/21		CONVERSION ACTION SE-SA		REQUEST DATE (6-11) 26 April 1962
LOCATION (CITY, STATE, COUNTRY) [REDACTED]		TYPE OF APPLICANT <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> CONSULTANT		IF OTHER, SPECIFY: [REDACTED]		GRADE (43-44) GS-13
CLEARANCE REQUIRED [REDACTED]		PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP) SECURITY CLEARANCE		TYPE OF ASSIGNMENT AND FUND HQS <input type="checkbox"/> USF <input type="checkbox"/> PF <input type="checkbox"/> V <input type="checkbox"/> UV <input type="checkbox"/>		ORGN. CODE (45-48) [REDACTED]
ATTACHMENTS PERSONAL HISTORY STATEMENT <input type="checkbox"/> PHOTOGRAPH (51) <input type="checkbox"/>		APPENDIX I <input type="checkbox"/> APPENDIX II <input type="checkbox"/>		REQUEST FOR WAIVER <input type="checkbox"/> REPORT OF INTERVIEW <input type="checkbox"/>		TYPE OF APPL. (49) [REDACTED]
VETERANS STATUS MALE - VETERAN <input type="checkbox"/> MALE - NON-VETERAN <input type="checkbox"/>		FEMALE - VETERAN <input type="checkbox"/> FEMALE - NON-VETERAN <input type="checkbox"/>		CLEARANCE (51) [REDACTED]		MOOTRS & FUND (50) [REDACTED]
REMARKS: Security #: 56169 [REDACTED]		Please forward clearance memo to SA Branch/CPD Attn: [REDACTED] 5 E 36		Phone verbal concurrence to [REDACTED] 27170		RECRUIT. CODE (52-54) [REDACTED]
VET PREF. & SEE (55) [REDACTED]						

SPACE BELOW FOR OS USE ONLY

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully: illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? **yes**

(Yes or No)

SEC. 1. PERSONAL BACKGROUND

Telephone **265**

PERMANENT ADDRESS **same as above**

(Rd. and Number)

(City)

(State)

(Country)

B. NICKNAME ☐ WHAT OTHER NAMES HAVE YOU USED? **none**

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES?

HOW LONG? IF A LEGAL CHANGE, GIVE PARTICULARS

C. DATE OF BIRTH

(City)

(State)

(Country)

D. PRESENT CITIZENSHIP **U.S.** BY BIRTH? **yes** BY MARRIAGE?

(Country)

BY NATURALIZATION CERTIFICATE NO. ISSUED BY

(Date)

(Court)

AT

(City)

(State)

(Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? **no**

(Yes or No)

(Country)

HELD BETWEEN WHAT DATES? TO ANY OTHER NATIONALITY?

(Country)

GIVE PARTICULARS

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? **no** GIVE PARTICULARS:

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? NA

PORT OF ENTRY? ON PASSPORT OF WHAT COUNTRY?

LAST U. S. VISA
(Number) (Type) (Place of Issue) (Date of Issue)

Sec. 2. PHYSICAL DESCRIPTION

AGE 29 SEX male HEIGHT 5' 7" WEIGHT 155
EYES hazel HAIR brown COMPLEXION ruddy SCARS none
BUILD stocky OTHER DISTINGUISHING FEATURES wear glasses

Sec. 3. MARITAL STATUS

A. SINGLE MARRIED yes DIVORCED WIDOWED

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES)

RESIDENCE OR BUSINESS ADDRESS
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM none TO BRANCH OF SERVICE
(Date) (Date)

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

Sec. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

2. NAME no other children RELATIONSHIP _____ AGE _____

CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

3. NAME _____ RELATIONSHIP _____ AGE _____

CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

Sec. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

MILITARY SERVICE FROM _____ TO _____ (Date) (Date)

COUNTRY _____ DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

Sec. 6. MOTHER (Give the same information for stepmother on a separate sheet)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY

(4)

OCCUPATION housewife LAST EMPLOYER none
EMPLOYER'S OR OWN BUSINESS ADDRESS _____
(St. and Number) (City) (State) (Country)
MILITARY SERVICE FROM _____ TO _____ BRANCH OF SERVICE _____
COUNTRY _____ DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN _____

Sec. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME _____ AGE deceased
(First) (Middle) (Last)
PRESENT ADDRESS no other brothers or sisters
(St. and Number) (City) (State) (Country) (Citizenship)
2. FULL NAME _____ AGE _____
(First) (Middle) (Last)
PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)
3. FULL NAME _____ AGE _____
(First) (Middle) (Last)
PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)
4. FULL NAME _____ AGE _____
(First) (Middle) (Last)
PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)
5. FULL NAME _____ AGE _____
(First) (Middle) (Last)
PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)

Sec. 8. FATHER-IN-LAW

[Redacted box for Father-in-Law information]

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY _____

CITIZENSHIP U.S. WHEN ACQUIRED birth WHERE? _____
(City) (State) (Country)
OCCUPATION agent LAST EMPLOYER Prudential Insurance Co
(St. and Number) (City) (State) (Country)

SEC. 9. MOTHER-IN-LAW

OCCUPATION housewife LAST EMPLOYER none (City) (State) (Country)

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES: NA

1. NAME _____ RELATIONSHIP _____ AGE _____

CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

2. NAME _____ RELATIONSHIP _____ AGE _____

CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

3. NAME _____ RELATIONSHIP _____ AGE _____

CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

CITIZENSHIP U.S. ADDRESS unknown
(St. and Number) (City) (State) (Country)

TYPE AND LOCATION OF SERVICE (IF KNOWN) AMJ, Japan, (I believe)

(6)

SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR Intelligence specialist
Planning, and/or research

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$ 4600
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY occasionally
FREQUENTLY _____, CONSTANTLY _____

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C. x
ANYWHERE IN THE UNITED STATES x, OUTSIDE THE UNITED STATES _____

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:

SEC. 13. EDUCATION

CHIEF UNDERGRADUATE COLLEGE SUBJECTS History, Government, Economics,

CHIEF GRADUATE COLLEGE SUBJECTS Japanese, Political Science, His-
tory, Geography.

SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

1946

IF DEFERRED GIVE REASON

INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS

College En-

listed Reserve July 1942-Mar. 1943.

SEC. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM August 1, 1946 date CLASSIFICATION GRADE
TO (IF IN FEDERAL SERVICE)

REASONS FOR LEAVING no chance for advancement

FROM May 1946 TO July 1946 CLASSIFICATION GRADE CAF 1 (I think)
(IF IN FEDERAL SERVICE)

REASONS FOR LEAVING to accept position at Dickinson

(8)

FROM Mar. 1943 TO Feb. 1946 CLASSIFICATION GRADE COT 10701
(IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY U.S. Army

ADDRESS principal stations, Yale U. of Michigan, St. Snelling, Minn
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS soldier NAME OF SUPERVISOR NA

TITLE OF JOB principally SALARY \$ 90 PER mo.
Japanese language specialist

YOUR DUTIES student and trainee translation of Japanese
military materials. Last few weeks before dis-
charge I served as a company clerk.

REASONS FOR LEAVING honorable discharge, length of service

FROM Feb. 1946 TO May 1946 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE)

[Empty box for additional information]

REASONS FOR LEAVING to enter U.S. Army

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

no

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Japanese SPEAK fluent READ fair WRITE slight

LANGUAGE German SPEAK fair READ fair WRITE slight

LANGUAGE SPEAK READ WRITE

B. LIST ALL SPORTS AND HOBBIES WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

badminton, fair bridge, fair

tennis, fair

gardening, good

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Japanese language specialist, MIS

college professor of history, 5 years experience

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

none

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 40 SHORTHAND 0

(10)

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

no

IF YES, INDICATE KIND OF LICENSE AND STATE

FIRST LIC. OR CERTIFICATE (YR) LATEST LIC. OR CERTIFICATE (YR)

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

Feb. 1946

Held full tuition scholarships at Harvard, 1940-43, from various sources.
G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

no

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

no

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

Number	City	State

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

SEC. 21. FINANCIAL BACKGROUND

A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY: yes IF NOT, STATE SOURCES OF OTHER INCOME

--

{12}

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? no
GIVE PARTICULARS, INCLUDING COURT: _____

[illegible]

A. FROM	TO	(City or section)	(Country)	(Purpose)
FROM	TO	(City or section)	(Country)	(Purpose)
FROM	TO	(City or section)	(Country)	(Purpose)
FROM	TO	(City or section)	(Country)	(Purpose)
FROM	TO	(City or section)	(Country)	(Purpose)

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO

SEC. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

no

IF "YES," EXPLAIN:

yes

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? IF SO, TO WHAT EXTENT?

moderately

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

no

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

no

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Central Intelligence Agency

Army Intelligence

Chief of Military History

Historical Office, Army Chemical Center, Edgewood, Md.

Navy Intelligence

Operations Research Office

(14)

7. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

not to my knowledge

Sec. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

[Redacted box for emergency contact information]

Sec. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

no

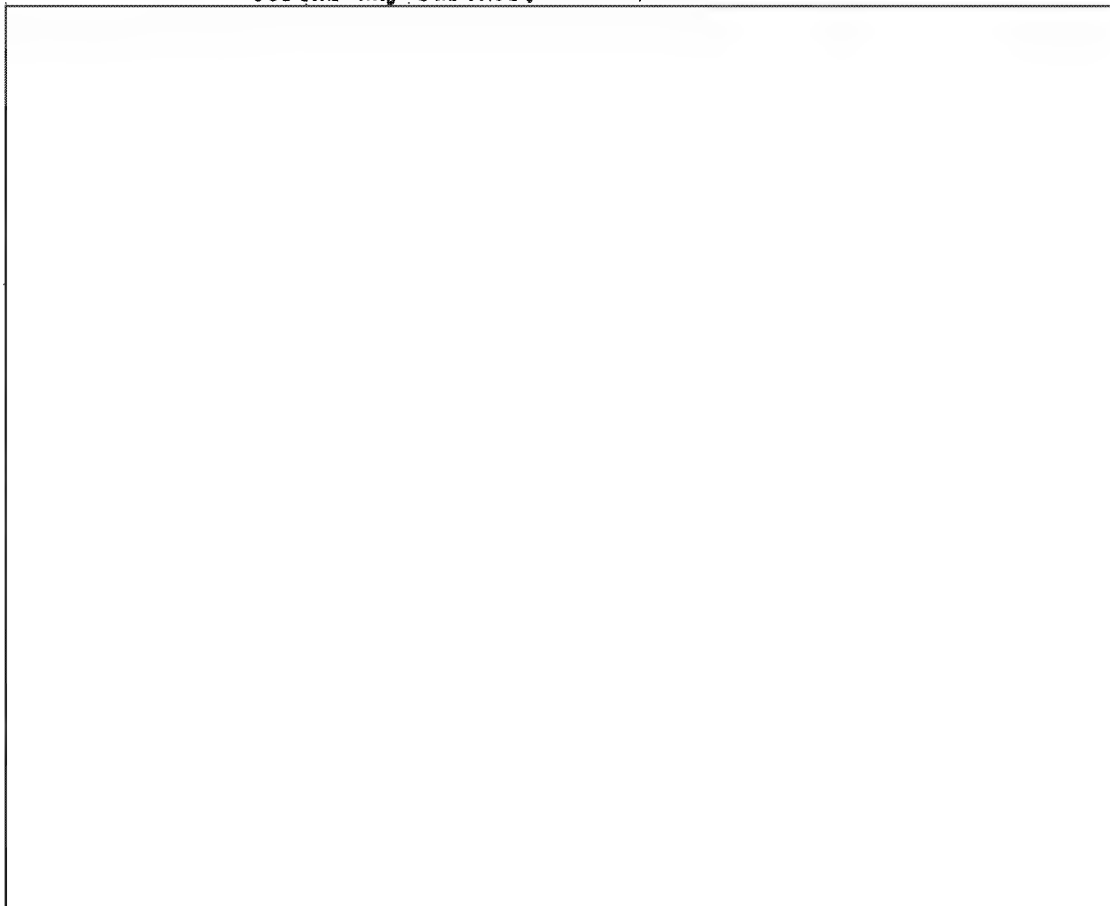
Sec. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

[Redacted box for signature and additional details]

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACES REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

Addenda

Sec. 11. I wish to state that the material here furnished is approximate only. I have not seen any of these relatives in over 10 years and cannot check the material any further.



APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Types with a pen or ballpoint pen. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the

instructions on the advertisement and regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. If you are mail to the same office give it by express registered by the announcement. Notify the office with whom you file this application of any change in your address.

DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commission Only

<input type="checkbox"/> APPROV.	<input type="checkbox"/> MATERIAL	<input type="checkbox"/> EXTENDED RESULTS
<input type="checkbox"/> NON APPROV.	<input type="checkbox"/> SUBMITTED	<input type="checkbox"/> RETURNED
NOTATIONS:		APP. REVIEW:
APPROVED:		
OPTION	GRADE	EARNED RATING
		PREFER- ENCE
		<input type="checkbox"/> 5 POINTS (EXTS)
		<input type="checkbox"/> 10 POINTS
		<input type="checkbox"/> WIFE OR WIDOW
		<input type="checkbox"/> DISAL.
		<input type="checkbox"/> OTHER INVESTIGATED
INITIALS AND DATE		

15. (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? 4500
PER YEAR.
You will not be considered for any position with a lower entrance salary.

(B) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR:
☐ 1 TO 3 MONTHS ☐ 3 TO 6 MONTHS ☐ 6 TO 12 MONTHS

NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.

(C) IF YOU ARE WILLING TO TRAVEL, SPECIFY:
☒ OCCASIONALLY ☐ FREQUENTLY ☐ CONSTANTLY

(D) CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED:
☒ IN WASHINGTON, D. C. ☐ ANYWHERE IN THE UNITED STATES
☐ OUTSIDE THE UNITED STATES

(E) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS:

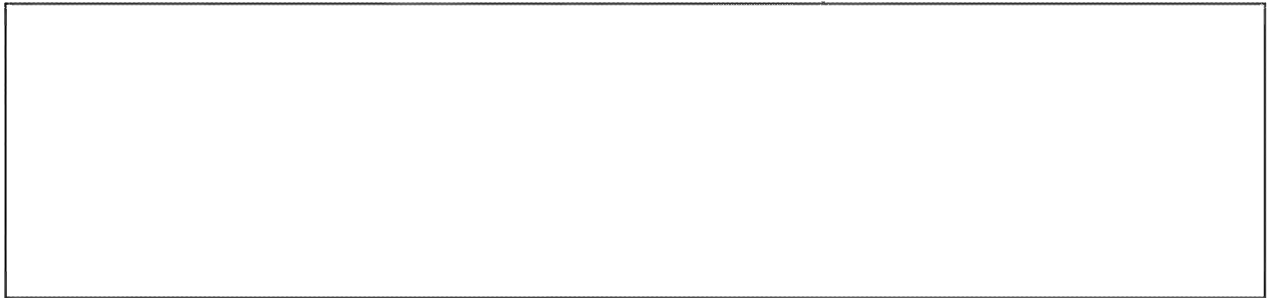
16. **REFERENCE:** It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing authority of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, as lasting for all periods of unemployment. Reference cannot more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent

religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the space below in its proper sequence.

(a) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

④ DATES OF EMPLOYMENT (month, year) FROM: _____ TO: _____		EXACT TITLE OF YOUR POSITION	CLASSIFICATION GRADE (if in Federal service)	SALARY OR EARNING: STARTING \$ _____ PER YEAR \$ _____ PER
PLACE OF EMPLOYMENT (city and State)		NAME AND TITLE OF IMMEDIATE SUPERVISOR		
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)		KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale sale, insurance agency, manufacture of goods, etc.)		
NUMBER AND KIND OF EMPLOYEES SERVED BY YOU		REASON FOR LEAVING		
DESCRIPTION OF YOUR WORK				



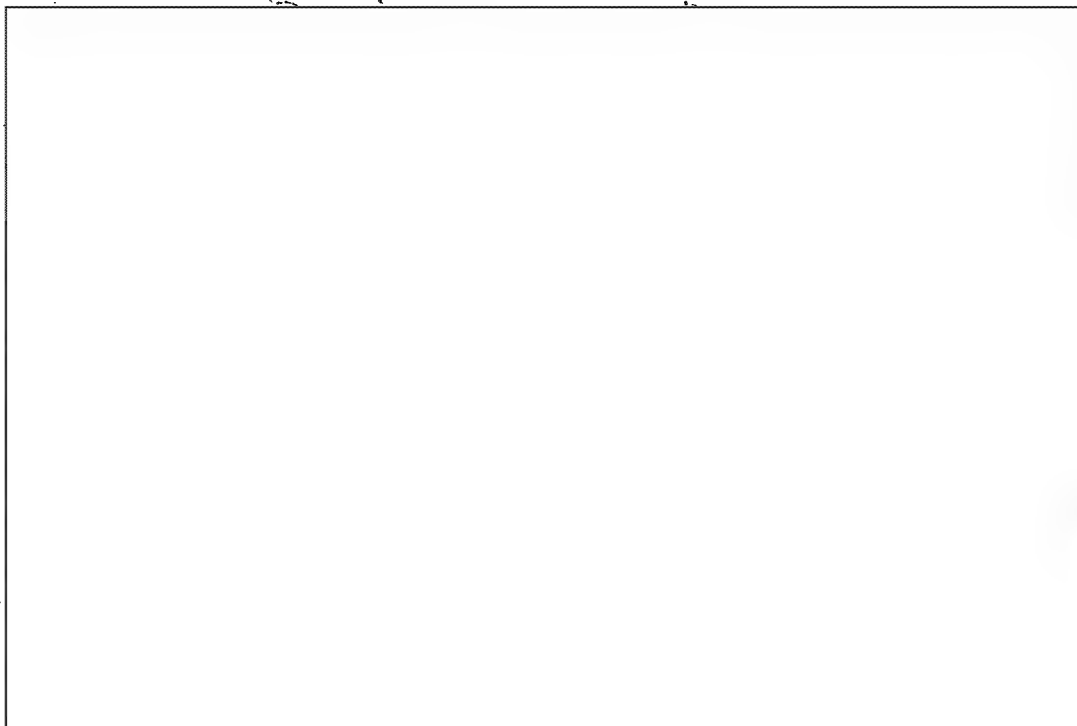
RECEIVED DIVISION

2

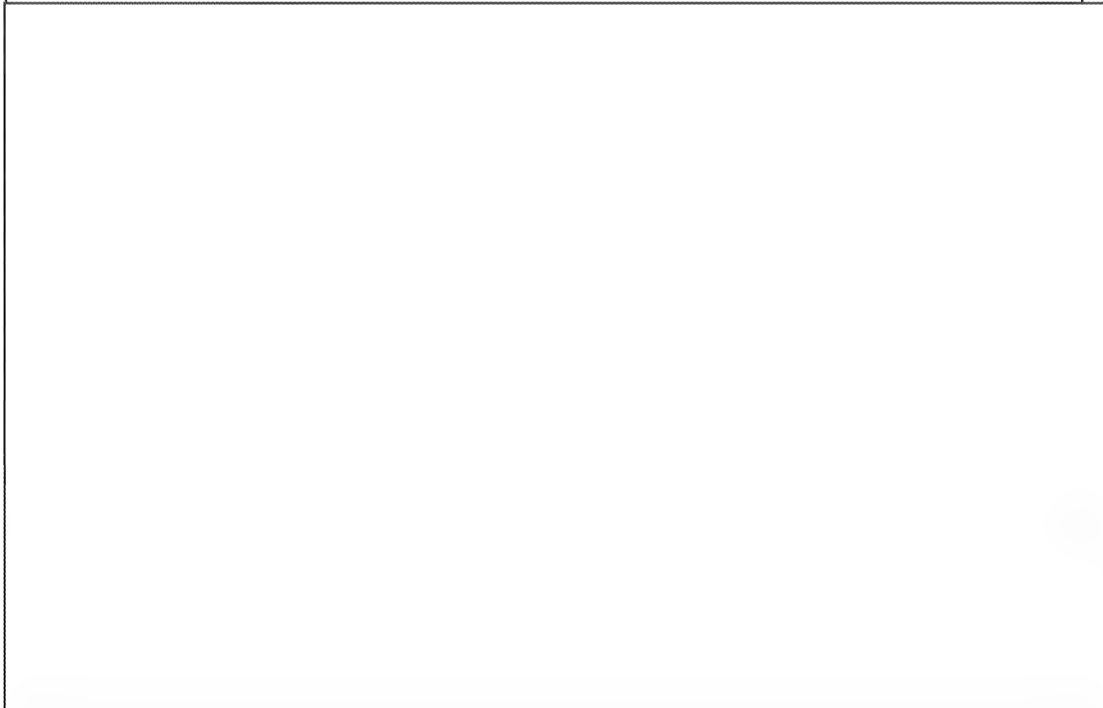
1921 JUL 10 11 21

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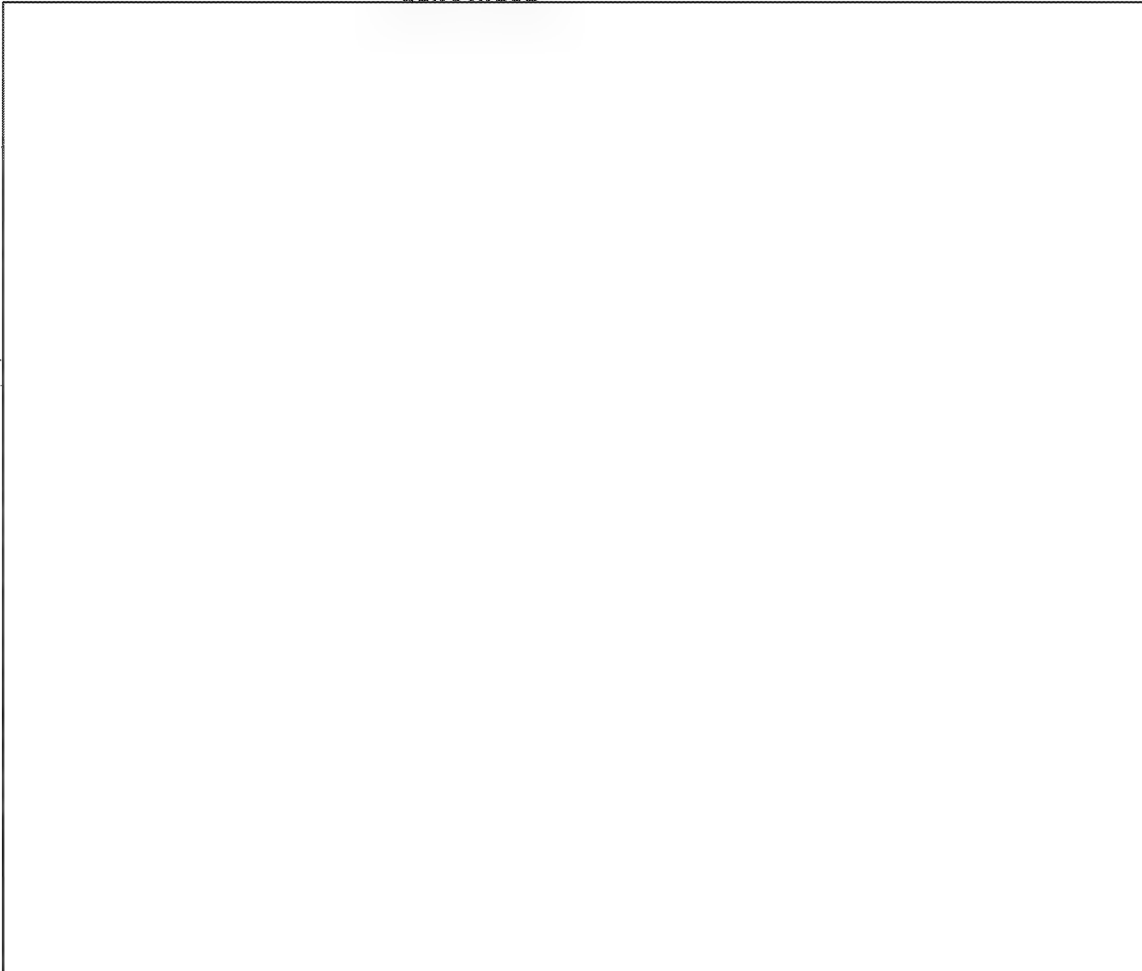
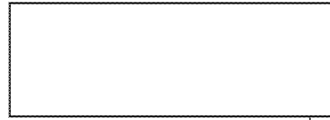


Items 21 and 23, Form 57

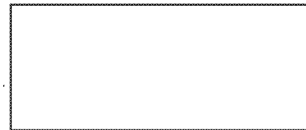
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- 3 -

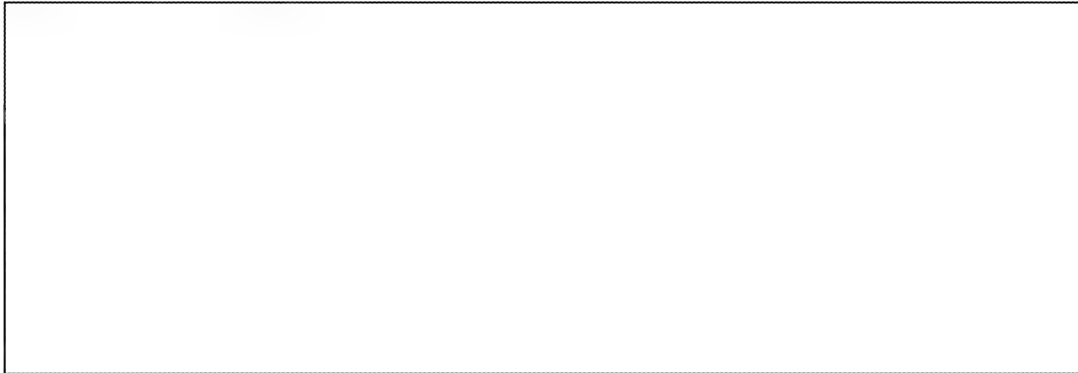
Work Project #1
continued



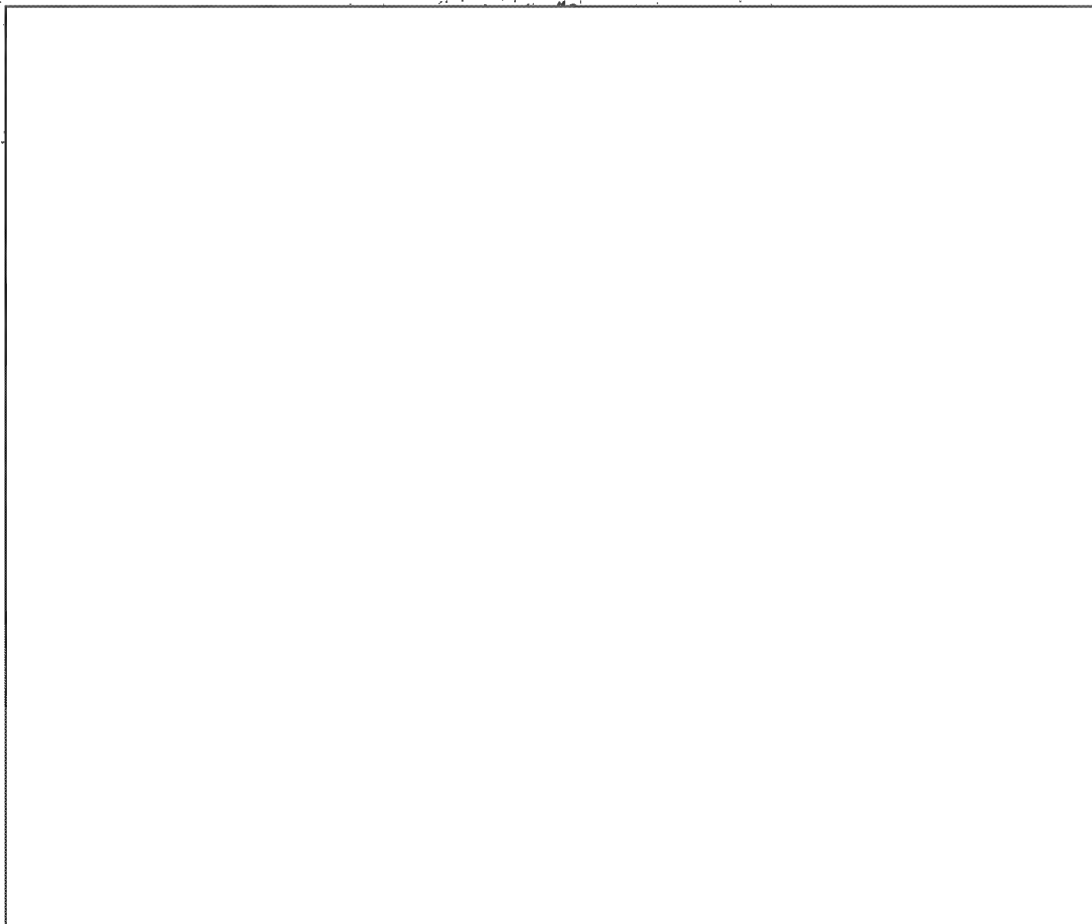
2) Final revision session



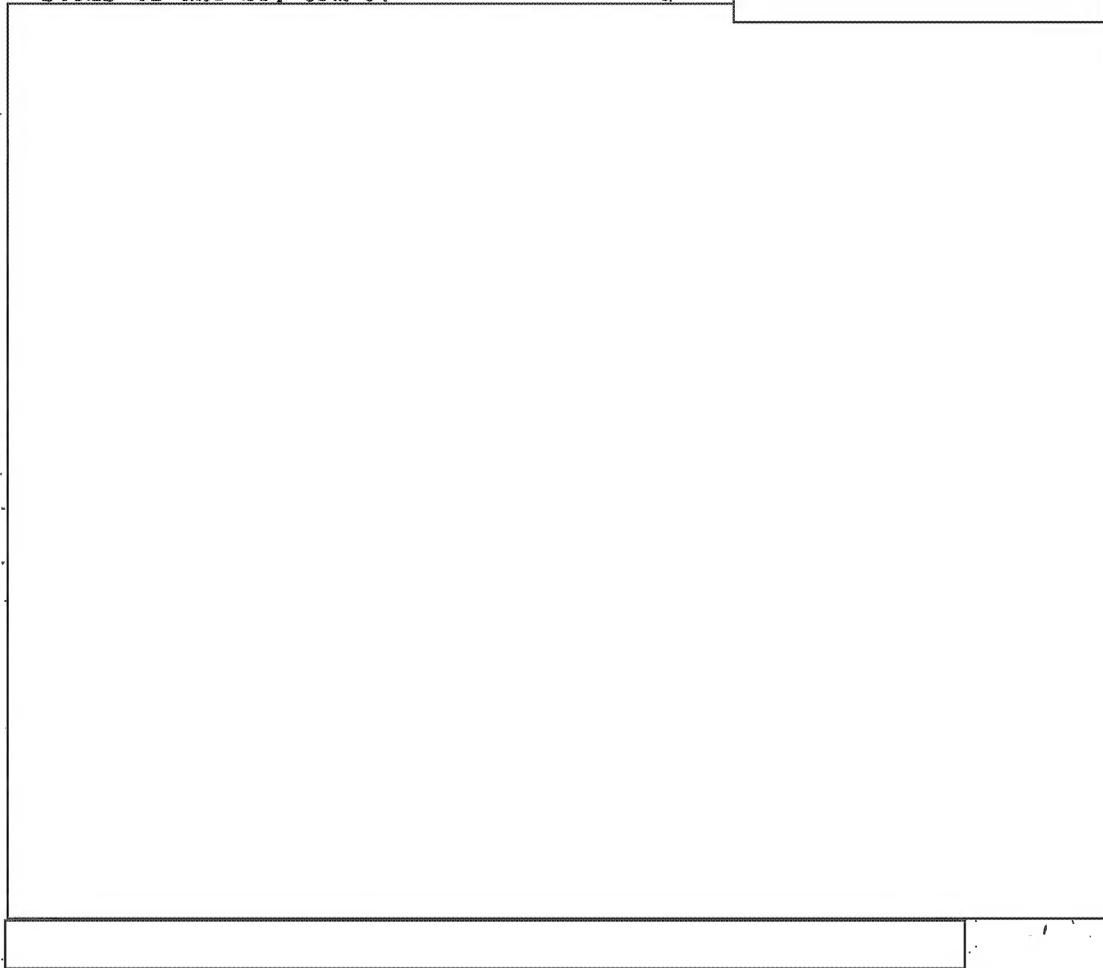
Items 21 and 23, Form 57



II. Research and Publication



Items 21 and 23, Form 57

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CONFIDENTIAL
(When Filled In)

SECURITY APPROVAL

DATE : 3 October 1966

YOUR
REFERENCE: 42095

CASE NO. : 56169

TO : Director of Personnel

ATTN :

SUBJECT :

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made for entrance on duty within 150 days, this approval becomes invalid.
3. As part of the entrance on duty processing:
 - ☐ A personal interview in the Office of Security must be arranged.
 - ☒ A personal interview is not necessary.
 - ☐ Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.
4. This is a Conversion case.

FOR THE DIRECTOR OF SECURITY:

Chief, Personnel Security Division

SECRET
(When Filled In)

REQUEST FOR SECURITY CLEARANCE				REQUEST NO. (11-2)	
				42095	
				REQUEST DATE (11-11)	
				21 Sept 1966	
NAME (LAST - FIRST - MIDDLE)				YEAR OF BIRTH (18-50)	
POSITION TITLE		POSITION NUMBER (21-28)		ORGAN. CODE (27-32)	
Ops Officer				OS-14	
LOCATION (CITY, STATE, COUNTRY)		ASSIGNMENT (OFFICE, DIVISION, BRANCH)			
Washington, D.C.		DDS/OTR/Ops School/Hd. Trng Br.			
TYPE OF APPLICANT		CONVERSION ACTION		IF OTHER, SPECIFY	
<input type="checkbox"/> REGULAR <input type="checkbox"/> CONSULTANT		SA-SB			
NAME (C)		TYPE OF ASSIGNMENT AND FUNDS			
CLEARANCE REQUIRED		PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)		SECRET	
		Full Clearance		FULL	
ATTACHMENTS		PERSONAL HISTORY STATEMENT		REQUEST FOR WAIVER	
		PHOTOGRAPH(S)		REPORT OF INTERVIEW	
VETERANS STATUS		MALE - VETERAN		VET PREP. & BEN (20)	
		MALE - NON-VETERAN			
		FEMALE - VETERAN			
		FEMALE - NON-VETERAN			
Security #: 56169					
Clearance memo to SA Branch/CFD					
Attn: [redacted]					
5 B 69					
SPACE BELOW FOR OS USE ONLY					

CONFIDENTIAL
SECURITY APPROVAL

Blf
int

Date: 29 August 1951

TO: Chief, [redacted]

Your Reference: 12143

FROM: Chief, Security Division

Case Number: 56169

SUBJECT: [redacted]

1. This is to advise you of security action in the subject case as indicated below:
 - ☒ Security approval is granted the subject person for access to classified information.
 - ☐ Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
 - ☐ The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.
2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.
3. Subject is to be polygraphed as part of the EOD procedures.

*Br. notified
31 Aug 1951
Blf
per Ethel
18 Sept.
1000*

[redacted]

J

CONFIDENTIAL